COUNTY BOROUGH OF SOUTHPORT

ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

AND

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1965

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

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FOR THE YEAR 1965

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HEALTH COMMITTEE, 1965
(appointed 27th May, 1965)

The Worshipful the Mayor Alderman H. H. BARBER, J.P.

Chairman	Councillor G. S. WILKINS
Vice-Chairman	Alderman Mrs. E. SMITH
The Mayor	Alderman H. H. BARBER, J.P.
Aldermen	J. CAMPION E. MCCABE, J.P. L. F. SPENCE
Councillors	R. J. ALLSOP J. R. CORCORAN Mrs. M. GOLDBERG R. B. HUGHES N. JACKSON (appointed 30/6/65) Mrs. C. KIRWAN Mrs. J. LEECH Dr. W. LIMONT, J.P. F. STANWORTH, B.SC. Mrs. B. POGSON (appointed 22/10/1965)
Co-opted Member	Dr. A. H. ROSCOE

STAFF 1965

(where staff are not shown individually the figures given are the numbers in post on 31st December, 1965—* indicates part-time staff)

Medical Officer of Health	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H., F.R.S.H.
Deputy Medical Officer of Health ...	ANNA I. DAVISON, M.B., Ch.B., C.P.H.
Assistant Medical Officers	M. C. FELL, M.B., Ch.B., D.P.H., D.C.H. T. J. DAILEY, N.B., Ch.B., D.P.H.
Consultant Obstetric Surgeon ...	*A. G. WILSON, D.obst., R.C.O.G., M.R.C.O.G.
Medical Officer for Tuberculosis Service (By arrangement with Liverpool Regional Hospital Board)	*R. S. COOK, M.B., Ch.B.
Principal Dental Officer	W. L. ROTHWELL, L.D.S.(Liv.)
Dental Officers	P. L. HEATHCOTE, L.D.S.(Liv.) J. B. LEECH, L.D.S., R.C.S.(Eng.)
Public Analyst	*G. H. WALKER, Ph.D., F.R.I.C.
Chief Public Health Inspector ...	S. D. BURGE (a) (b) (c).
Deputy Chief Public Health Inspector	W. VICKERS (a) (b) (c). 3 Specialist Inspectors 4 District Inspectors. 2 Pupil Inspectors.
Superintendent Nursing Officer ...	E. MITCHELL (d) (e) (f).
Senior Health Visitor	A. MULLAN (d) (e) (f). *12 Health Visitors 1 Tuberculosis Health Visitor. 2 State Registered Nurses for geriatric duties.

Non-Medical Supervisor of Midwives, Inspector of Nursing Homes and Domestic Help Service Organiser	M. McAleavy (d) (e). 3 District Midwives. 1 Pupil Midwife.
Superintendent, District Nurses' Home (under agency arrangements)	A. Burrows (d) (e) (g)
Deputy Superintendent, District Nurses' Home	S. Dugdale (d) (e) (g) 14 District Nurses. *4 District Nurses.
Matron, Southport Day Nursery ...	A. K. Baxter (d) (e) (h).
Deputy Matron, Southport Day Nursery	M. Roberts (n). 1 Warden. 3 Nursery Nurses. 4 Nursery Assistants. 5 Students.
Matron, Bedford Park Day Nursery ...	M. Raynor (i)
Deputy Matron, Bedford Park Day Nursery	S. Clarke (i) 1 Warden. 1 Nursery Nurse 3 Nursery Assistants. 2 Students.
Physiotherapist	*P. S. Flower (j).
Senior Occupational Therapist ...	*J. C. Hawkyard (k).
Chiropodist for Expectant Mothers and Handicapped Persons	*W. H. Rogans, M.Ch.S.
Chiropodist ... ... (Service for the Elderly). (under agency arrangements)	W. R. Wilkinson, M.Ch.S. *4 Chiropodists. *1 Receptionist.
Senior Mental Welfare Officer ...	K. Bain (l) (m). 2 Mental Welfare Officers. 1 Mental Welfare Assistant. 1 Craft Instructress. *1 Occupational Therapy Aide.
Supervisor, Training and Industrial Centre	I. H. Bayley.
Senior Assistant Supervisor, Training and Industrial Centre	M. Townley (n). 2 Assistant Teachers. 1 Craftsman/Teacher (o).
Psychiatric Social Worker	Vacant.
Administrative Assistant	F. H. Dix, A.C.I.S., Grad.A.C.C.A.
Chief Clerk	W. R. Holgate. 2 Senior Clerks. 9 Clerks and Shorthand/Typists.
Chief Fire & Ambulance Officer ...	J. Perkins, M.B.E., Grad. 1. Fire E. 21 Firemen/Ambulancemen.

Miscellaneous Staff	1 Infectious Diseases Enquiry Officer/ Mortuary Technician.	
	1 Rodent Officer.	

(a) Public Health Inspector's Certificate.
(b) Meat Inspector's Certificate.
(c) Smoke Inspector's Certificate.
(d) State Registered Nurse.
(e) Certificate Central Midwives Board.
(f) Health Visitor's Certificate.
(g) Queen's Nurse.
(h) State Registered Children's Nurse.
(i) Certificated Nursery Nurse.
(j) Member of Chartered Society of Physiotherapists.
(k) Member of the Association of Occupational Therapists.
(l) State Registered Mental Nurse.
(m) Certificate of Royal Medico-Psychological Association.
(n) Enrolled Nurse.
(o) Diploma of National Association of Mental Health.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1965

TO THE MAYOR, ALDERMEN AND COUNCILLORS

OF THE COUNTY BOROUGH OF SOUTHPORT

The Registrar General's estimate of the population for the mid-year 1965 was 79,980. Though this figure is an estimate, it is based on accurate information such as the numbers of children born and the number of deaths: the figure is exactly 100 less than the estimate for 1964 and for the first time for many years is below 80,000. We shall probably not know until the next full census whether this steadily downward trend is likely to be arrested. The percentage of persons over sixty-five years of age is very high in Southport as compared with most other towns and thus there is a high death rate: however, the number of children born has tended to be slightly greater in the last five years than in the previous five.

The Report of the Local Government Commission suggested that Southport should remain much as it is at present, in size: however, it is known that the Government is anxious to bring about changes which would result in the creation of units of local government of at least 100,000 population and may not look with favour on this particular recommendation of the Commission. The position is again in flux as a result of the appointment of a further Commission. Though units of this kind may be financially more viable, it would seem to me that the larger the town the more difficult it becomes for a Medical Officer of Health to know his area, and its people, in detail; and for individuals to be able to see him personally; factors which are of considerable importance in his work.

Some believe that the housing development which is going on in the Ainsdale area is bound to result in a larger town population: this may be so but the indications at the moment are that it will only slow down the rate of decline of the population.

Any administrator worth his salt faced with a static or possibly falling population, is bound to look at the costs of the service which is being provided for the public. In our case in money terms the costs of the local health authority services (before the deduction of government grants) have increased in ten years from £87,195 in 1955/1956 to £198,235 in 1964/1965 and the cost of the School Health Service from £19,143 in 1955/1956 to £36,100 in 1964/65: one has to take into account the fall in the value of money. Major legislation such as the Mental Health Act 1959 and the formulation of the Ten Year Plan which local authorities were required to make in 1962 for the Development of the Health and Welfare Services make a major impact. We are faced with a situation in which costs are constantly rising and at the same time we have to provide, in certain sections of the department, increased services, which entail new expenditure. It has to be understood that new legislation frequently entails extra cost in the provision of buildings, personnel and equipment and can often only be put into operation if all these and money are forthcoming.

Parliament has during recent years laid great stress on welfare and social matters and all local health authorities have, together with hospital authorities, done what they can to improve their services. It is, however, common knowledge amongst informed sections of the community that though our health services are reasonably good they still leave much to be desired. Old people often wait for long periods before there is a bed available in hospital and however good the domiciliary services, such as district nursing and home help are, they cannot cope adequately with the patient who requires care throughout twenty-four hours each day. It is some measure of this need that there are two hundred and five beds in nursing homes in Southport, mostly occupied by elderly patients and the town would be very badly off without them in the present state of the Health Services. Certain other countries are better off than we are, and can afford health services which are very good indeed the results of which are reflected in particularly low infantile mortality rates and more highly developed mental health services. It is obvious that a large percentage of our financial resources in health matters for some time to come will need to be expended on new hospitals, and it will be many years before those already planned can be built. In such circumstances a Medical Officer of Health must take great pains to advise his authority wisely so that the available money is spent on those local health authority services which will give the most useful return in terms of prevention of illness and the maintenance of health.

Advances in medical science may make available to the general public, life saving measures which should be provided quickly. This may not be possible because of lack of adequately trained staff or money. A case in point is the provision of facilities for the early detection of cancer of the womb in women. This also is held up because there are not sufficient trained technicians yet available. People do not always realise that the quality and extent of their local services may depend to some degree on how much money the Council is prepared to raise in a particular year from the local rates. Popular opinion looks on these as an unfair tax but at least local ratepayers are informed on the rate demand, how much of every £1 raised is expended on local health authority and other services. The estimated amount for health for the financial year 1965/1966 was nearly 1/3d. in the £1 (before deduction of government grants) which does not seem to be large in relation to the work covered as outlined in this report. At least one can say that Southport has got on well with the proposals as outlined in the Ten Year Plan. Whether it will prove to be financially possible to go ahead with the remaining schemes, at the times planned remains to be seen; one of these is the building of the proposed new Social Services Centre on the 2 Church Street, 44/46 Hoghton Street site.

"Springbrook" the new home for mentally handicapped children was opened during the year and "The Meadows", the home for mentally handicapped adults was completed. Good progress has been made in the building of the child welfare centre and of the home for the mentally infirm elderly, in Ainsdale. These are substantial improvements and should serve the town well for many years to come.

The infant mortality rate this year was 22.77 a little higher than that for the country as a whole for which the figure was 19. If illegitimate baby deaths are excluded the figure is 19.86. The percentage of babies born illegitimate was 8.3, the number 93: this is a high figure and each such baby produces considerable strain on its young mother and is always a social problem which may require much effort and expenditure to solve. Many agencies and people of good will are attempting to help but opinions vary as to how best this may be done. There seems to be little doubt that though girls in their early teens are now physically much more developed than their counterparts of twenty five years ago, they are not sufficiently emotionally mature to meet some of the responsibilities of adult life. The staffs of every health department are aware of the great difficulties encountered by the young mothers of illegitimate babies and the tragic effects which this transgression of the moral code can bring. In my experience some parents are unable to explain to their sons and daughters much about their physical and emotional make-up or the need to develop a sense of responsibility to their fellows and to themselves.

Some sections of the department have been particularly busy during the year, e.g. the home nursing work rose by 15% on the previous year, to more than 74,000 visits and the mental health service was particularly hard pressed. A number of sections suffered shortages of personnel and the Offices, Shops and Railway Premises Act work and the occupational therapy and after care of mental illness patients suffered accordingly. In some instances the shortage of staff led to strain on those available to do the work.

I am required by the Minister of Health to comment this year on the following:

(a) *Health Education: particularly venereal disease and smoking.*

Though our Ten Year Plan envisages the appointment of a Health Education Officer, financial stringency has so far prevented the making of such an appointment and the matter is to be reconsidered next year. Fortunately there is not a large venereal disease problem in this town. Publicity was given to the matter and to anti-smoking posters during the year: some health education about the dangers of smoking was carried out in the schools. An exhibit which caused considerable interest was a bottle containing tar distillate from artificially smoked cigarettes which looked and smelled repulsive, and which illustrated the sort of pollution that takes place in lungs during smoking.

(b) *Chiropody.*

The Council provides a service for those aged over 65 years of age through the agency of the Voluntary Old People's Welfare Committee and also a direct service for school children, expectant mothers and handicapped persons. Details are in the body of the report. It is not thought that at the moment there is a case for establishing a clinic in any other area in the town though this may be needed later.

(c) *Congenital Malformation.*

The information which Medical Officers of Health are now required to collect about babies malformed at birth is likely to prove to be of considerable value. There is good co-operation between the hospitals and this department in the collection of this information, the details of which are outlined on page 24 of the report.

(d) *Incontinence Pads Service.*

The use of these through the Home Nursing Service has much reduced the need for a laundry service for incontinent patients. Used properly they are a great help but disposal is not easy where no fire is available. Details of the supply of these pads are given on page 41 of the report.

(e) *Fluoridation of Water Supplies.*

Though Southport's local health authority approved fluoridation of water supplies in principle some years ago it is not at present able to so treat the water because it is not possible to treat separately that part of the West Lancashire Water Board's supply which comes to Southport, as the same supply is shared by certain Lancashire County areas. Until the County Council is able to proceed, this matter would seem to have to be in abeyance. Southport's water does contain naturally a minute proportion of 'fluoride'.

As I do each year, I wish to record my thanks to the members of Council, to my medical colleagues in the town and to the staff of the Department for great support and help during the year.

G. N. M. WISHART,

Medical Officer of Health.

Section I

STATISTICS

GENERAL STATISTICS

	1964	1965
Area of County Borough (including Foreshore) (acres)	18,333	18,333
Area of County Borough (excluding Foreshore) (acres)	9,426	9,426
Population (1961 Census Report)	82,004	82,004
Population (estimated by the Registrar General) mid-year	80,080	79,980
Density of Population per acre (excluding Foreshore)	8.5	8.5

VITAL STATISTICS

	1964	1965			
Live Births Males	595	568	Total	1,105	1,098
Females	510	530			
Rate per 1,000 population				13.79	13.73
Adjusted Birth Rate per 1,000 population				16.55	16.48
(area comparability factor)				(1.20)	(1.20)
Birth Rate for England and Wales				18.4	18.1
Illegitimate Live Births per cent of total live births				6.5%	8.3%
Stillbirths Number				24	19
Rate per 1,000 total live and stillbirths				21.26	17.01
Total live and stillbirths				1,129	1,117
Infant Deaths (under 1 year)				21	25
Infant Mortality Rates:					
Total Infant Deaths per 1,000 total live births				19.00	22.77
Legitimate Infant Deaths per 1,000 legitimate live births ...				19.36	19.86
Illegitimate Infant Deaths per 1,000 illegitimate live births ...				—	54.94
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)				11.76	13.66
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)				10.86	10.93
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)				32.77	27.75
Maternal Mortality (including abortion) ...					
Number of Deaths				1	Nil
Rate per 1,000 total live and stillbirths				0.88	—
Deaths of Infants under 1 day old				7	6
Infant Mortality Rate per 1,000 births for England and Wales ...				20.00	19.00

	1964	1965			
Deaths Males	641	662	Total	1,460	1,420
Females	819	758			
Rate per 1,000 population				18.23	17.76
Adjusted death rate per 1,000 population				12.76	11.72
(area comparability factor)				(0.70)	(0.66)
Death Rate for England and Wales				11.30	11.50
Excess of Deaths over Registered Births				355	322

VITAL STATISTICS

Comparison of Birth, Death and Infantile Mortality Rates for England, Wales and Southport for Period 1871 to 1965

Period	Birth Rate (per 1,000 population)		Death Rate (per 1,000 population)		Infantile Mortality Rate (per 1,000 live births)		Expectation of Life
	England & Wales	Southport	England & Wales	Southport	England & Wales	Southport	England & Wales
1871—1880	35·4	30·69	21·4	23·43	149	161	
1881—1890	32·4	24·37	19·1	17·78	142	132	
1891—1900	29·9	22·31	18·2	17·23	153	143	
1901—1910	27·2	17·49	15·4	14·43	128	121	
1911—1920	21·8	13·95	14·4	13·86	100	84	M.—48; F.—52
1921—1930	18·3	12·71	12·1	12·66	72	65	
1931—1940	14·9	10·30	12·3	15·07	59	56	
1941—1950	16·9	12·68	12·4	15·59	43	39	
1951	15·4	*11·96	12·5	*14·70	30	41	M.—59; F.—63
1952	15·3	*12·22	11·3	*12·32	28	30	
1953	15·4	*12·23	11·4	*12·07	27	21	
1954	15·1	*12·31	11·3	*11·34	25	35	M.—66; F.—71
1955	15·0	*12·64	11·7	*13·20	24·9	35	
1956	15·7	*13·12	11·7	*12·16	23·8	27	
1957	16·1	*13·41	11·5	*11·98	23·0	24	
1958	16·4	*13·67	11·7	*12·74	22·5	21	M.—67; F.—73
1959	16·5	*14·32	11·6	*12·51	22·0	20	
1960	17·1	*14·87	11·5	*12·84	21·7	34	
1961	17·4	*15·11	12·0	*13·34	21·4	17	
1962	18·0	*14·86	11·9	*12·69	20·7	20·7	
1963	18·2	*16·40	12·2	*13·12	20·9	26·4	
1964	18·4	*16·55	11·3	*12·76	20·0	19·0	
1965	18·1	*16·48	11·5	*11·72	19·0	22·8	

*Corrected Rates

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1965

Causes of Death	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years 1–	5–	15–	25–	35–	45–	55–	65–	75 & over
1 Tuberculosis—Respiratory...	M	1	—	—	—	—	—	—	—	—	—	1	—
	F	2	—	—	—	—	—	—	—	—	2	—	—
2 Tuberculosis—Other ...	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
3 Syphilitic Disease	M	3	—	—	—	—	—	—	—	—	1	1	1
	F	1	—	—	—	—	—	—	—	—	—	1	—
4 Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
5 Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—
6 Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—	—	—
7 Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—
8 Measles	—	—	—	—	—	—	—	—	—	—	—	—	—
9 Other Infective and parasitic diseases	M	1	—	—	—	—	—	—	—	—	—	—	1
	F	2	—	—	—	—	—	—	1	—	—	1	—
10 Malignant Neoplasm, Stomach	M	12	—	—	—	—	—	—	—	—	3	5	4
	F	14	—	—	—	—	—	—	—	3	1	3	7
11 Malignant Neoplasm, lung bronchus	M	43	—	—	—	—	—	—	1	5	12	20	5
	F	18	—	—	—	—	—	—	—	2	4	8	4
12 Malignant Neoplasm, breast	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	25	—	—	—	—	—	—	1	3	7	6	8
13 Malignant Neoplasm, uterus	F	10	—	—	—	—	—	—	—	1	3	—	6
14 Other Malignant and ... Lymphatic Neoplasms ...	M	55	—	—	—	—	2	1	1	4	14	14	19
	F	63	—	—	1	1	—	—	2	5	5	14	35
15 Leukaemia	M	5	—	—	—	—	1	—	1	—	—	—	3
	F	2	—	—	1	—	—	—	—	—	1	—	—
16 Diabetes	M	3	—	—	—	—	—	—	—	—	—	2	1
	F	12	—	—	—	—	—	—	—	—	—	5	7
17 Vascular lesions of Nervous System	M	85	—	—	—	—	—	—	3	4	7	32	39
	F	136	—	—	—	—	—	—	2	3	8	31	92
18 Coronary Disease—Angina	M	184	—	—	—	—	—	1	3	13	44	59	64
	F	129	—	—	—	—	—	—	—	2	9	40	78
19 Hypertension with Heart Disease	M	6	—	—	—	—	—	—	—	—	—	2	4
	F	11	—	—	—	—	—	—	—	—	1	4	6
20 Other Heart Disease ...	M	57	—	—	—	—	—	—	1	2	4	11	39
	F	127	—	—	—	—	—	—	1	2	5	14	105

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1965 - *continued*

Causes of Death	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years 1–	5–	15–	25–	35–	45–	55–	65–	75 & over
21 Other Circulatory Disease ...	M	24	—	—	—	—	—	—	—	2	3	4	15
	F	35	—	—	—	—	—	—	—	1	—	9	25
22 Influenza	M	2	—	—	—	—	—	—	—	—	1	—	1
	F	—	—	—	—	—	—	—	—	—	—	—	—
23 Pneumonia	M	27	1	1	—	—	—	—	—	—	5	5	15
	F	29	—	2	—	—	—	—	1	—	1	6	19
24 Bronchitis	M	61	—	—	1	—	—	—	—	4	8	20	28
	F	18	—	—	—	—	—	—	—	1	6	4	7
25 Other Diseases of Respiratory System	M	8	—	—	—	—	—	—	—	1	3	1	3
	F	8	—	1	—	—	—	—	—	1	—	2	4
26 Ulcer of Stomach and Duodenum	M	12	—	—	—	—	—	—	—	—	1	3	8
	F	9	—	—	—	—	—	—	—	—	—	2	7
27 Gastritis, Enteritis and Diarrhoea	M	1	—	—	—	—	—	—	—	—	—	1	—
	F	6	—	1	—	—	—	—	—	—	—	2	3
28 Nephritis and Nephrosis ...	M	4	—	—	—	—	—	—	1	1	1	—	1
	F	7	—	—	—	—	—	—	—	1	1	2	3
29 Hyperplasia of Prostate ...	M	2	—	—	—	—	—	—	—	—	—	1	1
30 Pregnancy, Childbirth, Abortion	F	—	—	—	—	—	—	—	—	—	—	—	—
31 Congenital Malformations ...	M	4	2	1	—	—	—	—	—	—	1	—	—
	F	6	3	3	—	—	—	—	—	—	—	—	—
32 Other defined and ill-defined Diseases	M	34	7	—	1	—	—	1	2	2	5	8	8
	F	48	2	—	—	—	1	2	—	3	3	13	24
33 Motor Vehicle Accidents ...	M	6	—	—	—	—	1	—	1	2	—	1	1
	F	4	—	—	—	2	—	—	—	—	1	—	1
34 All Other Accidents ...	M	13	—	1	—	—	1	1	—	—	3	—	7
	F	32	—	—	—	—	—	—	—	2	3	3	24
35 Suicide	M	7	—	—	—	—	—	1	—	2	1	2	1
	F	4	—	—	—	—	—	—	—	—	3	1	—
36 Homicide and Operations of War	M	2	—	—	—	—	—	—	—	1	—	—	1
	F	—	—	—	—	—	—	—	—	—	—	—	—
Totals—All Causes ...	M	662	10	3	2	—	5	5	14	43	117	193	270
	F	758	5	7	2	3	1	2	8	30	64	171	465
Totals—Male and Female ...	—	1420	15	10	4	3	6	7	22	73	181	364	735

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

Cause of Death	1964		1965	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	602	41·23	573	40·35
Cancer	284	16·03	247	17·40
Vascular Lesions of nervous system... ...	233	15·96	221	15·55
Respiratory Diseases...	140	9·59	158	11·12
Violence, including suicide	67	4·59	68	4·80
Ulcer of Stomach and Duodenum	16	1·09	21	1·48
Tuberculosis, all forms	8	0·55	3	0·21
All Other Causes	160	10·96	129	9·08
Totals	1,460	100·00	1,420	100·00

DEATHS DUE TO VIOLENCE, Year 1965

Classification	*Male*	*Female*	*Totals*
Motor Vehicle Accidents	6	4	10
All other accidents	13	32	45
Suicide	7	4	11
Homicide and Operations of War	2	—	2
Totals	28	40	68

Age Groups	0—15 *yrs.*		15—65 *yrs.*		65 *and over*	
	M.	*F.*	*M.*	*F.*	*M.*	*F.*
Motor Vehicle Accidents	—	2	4	1	2	1
All other accidents	1	—	5	5	7	27
Suicide	—	—	4	3	3	1
Homicide and Operations of War ...	—	—	1	—	1	—
Totals	1	2	14	9	13	29

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births—years 1956—1965

Year	Population	Male	Female	Total	Rate per 1.000 Population	Corrected for Age and Sex	INFANTS Under One Year	Rate per 1,000 Births	Legitimate	Rate per 1,000 Legitimate Births	Illegitimate	Rate per 1,000 Illegitimate Births	Pulm'ry Tuberculosis	Rate per 1,000 Population	Other Forms T.B.	Rate per 1,000 Population
1956	82100	637	750	1387	16·89	12·16	26	27	25	28	1	21	6	0·07	—	—
1957	81900	636	708	1344	16·41	11·98	24	25	22	24	2	31	9	0·11	1	0·01
1958	81760	646	777	1423	17·45	12·74	21	21	20	21	1	18	6	0·07	1	0·01
1959	81370	603	773	1376	16·91	12·51	21	20	18	18	3	63	7	0·08	2	0·02
1960	81350	648	783	1431	17·59	12·84	36	34	33	32	3	55	4	0·05	—	—
1961	81020	656	824	1480	18·27	13·34	19	17	16	16	3	45	4	0·05	—	—
1962	80730	661	831	1492	17·24	12·69	22	21	22	22	—	—	4	0·05	—	—
1963	80160	702	800	1502	18·74	13·12	29	26	28	27	1	13	10	0·12	1	0·01
1964	80080	641	819	1460	18·23	12·76	21	19	20	19	1	14	7	0·09	1	0·01
1965	79980	662	758	1420	17·76	11·72	25	23	20	20	5	55	3	0·04	—	—

CANCER

Localisation of Disease and Number of Deaths for years 1956 to 1965

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Stomach and Duodenum	27	22	27	32	30	28	38	24	33	26
Lung Bronchus	49 (Male 45) (Female 4)	45 (Male 40) (Female 5)	54 (Male 45) (Female 9)	37 (Male 32) (Female 5)	39 (Male 32) (Female 7)	51 (Male 43) (Female 8)	61 (Male 46) (Female 15)	64 (Male 54) (Female 10)	45 (Male 33) (Female 12)	61 (Male 43) (Female 18)
Breast	24	20	13	28	28	25	31	26	18	25
Uterus	8	5	11	14	5	10	13	9	7	10
Other Sites	107	141	99	127	115	98	113	112	122	118
Leukaemia	8	7	6	2	7	6	6	7	9	7
Total Deaths From Cancer	223	240	210	240	224	218	262	242	234	247
Total Deaths All Causes	1387	1344	1428	1376	1431	1480	1492	1502	1460	1420
% of Total Deaths	16·08	17·85	14·75	17·44	15·65	14·73	17·56	16·11	16·03	17·40

MATERNAL MORTALITY FOR YEARS 1956 TO 1965

Year	No. of Live Births	No. of Live and Stillbirths	Maternal Deaths Rates per 1,000 Live and Stillbirths					
			Sepsis		Other Causes		Total	
			No.	Rate	No.	Rate	No.	Rate
1956	945	984	—	—	1	1.02	1	1.02
1957	972	994	—	—	—	—	—	—
1958	989	1019	—	—	—	—	—	—
1959	1031	1059	—	—	—	—	—	—
1960	1071	1094	—	—	1	0.91	1	0.91
1961	1091	1121	—	—	—	—	—	—
1962	1062	1079	1	0.93	—	—	1	0.93
1963	1096	1116	—	—	—	—	—	—
1964	1105	1129	—	—	1	0.88	1	0.88
1965	1098	1117	—	—	—	—	—	—

ANALYSIS OF LIVE PREMATURE BIRTHS FOR YEAR 1965

Weight at birth	Premature Live Births												Premature Still Births	
	Born in hospital				Born at home or in a nursing home									
					Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
		Died				Died				Died			Born	
	Total births (1)	within 24 hours of birth (2)	In 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	In hospital (13)	at home or in a nursing home (14)
1. 2 lb. 3 oz. or less	4	1	1	—	—	—	—	—	—	—	—	—	2	—
2. Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	5	3	—	—	—	—	—	—	—	—	—	—	1	—
3. Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	12	1	1	—	—	—	—	—	—	—	—	—	5	—
4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	18	—	1	—	1	—	—	—	—	—	—	—	1	—
5. Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	29	—	1	—	4	—	—	—	—	—	—	—	4	—
6. Total	68	5	4	—	5	—	—	—	—	—	—	—	13	—

INFANT MORTALITY

Number of Deaths from Stated Causes at Various Periods Under 1 Year of Age for Year 1965

Cause of Death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	28 days -2 mths.	2 mths.	3 mths.	4 mths.	5 mths.	6 mths.	7 mths.	8 mths.	9 mths.	10 mths.	11 mths.	Total under 1 year
Asphyxia	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	2
Congenital Malformations	—	—	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3
Cerebral haemorrhage	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Prematurity	4	1	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	8
Gastro enteritis	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Congenital Heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Exomphelus	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Delations of the heart	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Bilary duct Athesia	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Broncho pneumonia	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	1	—	—	—	1	1	5
Totals	6	1	3	1	—	1	—	2	—	1	1	1	2	1	—	1	1	—	1	1	1	25

CONGENITAL MALFORMATIONS

During the year, 28 cases of congenital malformations occurring in Southport children were reported, 10 males and 18 females. Of these 1 male and 4 females were stillborn, and 2 males and 3 females died.

CLASSIFICATION OF CASES REPORTED IN 1965

	Live		Stillborn		Deaths	
	M	F	M	F	M	F
Central Nervous System						
Anencephalus	—	1	—	4	—	1
Hydrocephalus	1	—	—	—	1	—
Defects of spinal cord NOS	—	1	—	—	—	1
Spina Bifida	2	—	—	—	2	—
Alimentary System						
Cleft Lip	—	1	—	—	—	—
Cleft Palate	1	2	—	—	—	—
Rectal and Anal Atresia	—	1	—	—	—	—
Other Defects of Alimentary System ...	—	1	—	—	—	—
Limbs						
Defects of Lower Limb NOS	1	—	—	—	—	—
Reduction Deformities—Hemimelia ...	1	—	—	—	—	—
Dislocation of Hip	—	3	—	—	—	—
Talipes	4	—	—	—	—	—
Other Systems						
Vascular defects of skin	1	2	—	—	—	—
Exomphalos	—	1	—	—	—	1
Other Malformations						
Congenital malformations NOS	—	—	1	—	—	—
Mongolism	1	1	—	—	—	—

The arrangements for the collection of this information work well, due largely to the good co-operation with the staffs of the maternity hospitals and to the Matrons of which I am particularly indebted.

Section II

PERSONAL HEALTH SERVICES

CARE OF EXPECTANT AND NURSING MOTHERS

Ante-Natal Care

A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1965 for those mothers who had booked to have their confinements at home and also for mothers who were to be admitted to the St. Katharine's Maternity Hospital. This clinic is conducted by Mr. A. C. Wilson, one of the Obstetric Consultants for the two maternity hospitals in the town. The Matron or Deputy Matron of the St. Katharine's Maternity Hospital and the non-medical Supervisor of Midwives also do duty at this clinic. In addition, the domiciliary midwives attend in rotation to meet their own patients.

Subject to the consent of the general practitioner concerned, mothers who have booked with their family doctor may attend this clinic to obtain additional ante-natal care. Mothers who attend have a blood test for Kahn reaction, haemoglobin estimation, blood grouping and are examined for Rhesus factor as routine measures.

Maternity outfits are supplied free of cost to all mothers who are having confinements at home.

The Hospital bed accommodation is such that most mothers wishing to have their babies in hospital are able to do so.

ANTE-NATAL CLINICS—YEAR 1965

(i) No. of women who attended the clinic for the first time during the year:—	
St. Katharine's Maternity Hospital cases	49
District cases	3
Total	52
(ii) No. of women included in (i) above who were sent by their family doctor or general practitioner obstetrician	15
No. of attendances made by mothers during the year:—	
St. Katharine's Maternity Hospital cases	393
District cases	1
Total attendances during year ...	394
No. of sessions held by hospital medical staff during the year	50
District Midwives' Sessions:	
at 44 Hoghton Street clinic	51
at Clinics held in general practitioners' surgeries	194

Post-Natal Care

All mothers who have not made arrangements to be examined by their own doctors are invited to attend the Post-Natal Clinic which is held each week at 44 Hoghton Street. The Clinic is also conducted by Mr. A. C. Wilson, the Consultant Obstetrician.

POST-NATAL CLINICS—YEAR 1965

No. of women who attended the clinic for the first time during the year ...	506
No. of attendances made by mothers during the year	524
No. of sessions held by hospital medical staff during the year	51
No. of sessions by health visitors during the year	51

There is a growing tendency for mothers to come home from maternity hospital before the tenth day after the birth: the arrangements for the continuing of proper care for the mother and baby in Southport are at present under review.

The number of mothers discharged before the tenth day in 1965 was 261.

Care of Premature Infants

The decision as to whether a premature infant can be nursed satisfactorily in its own home lies with the doctor in attendance and if he considers that removal of the infant to one of the maternity hospitals is advisable, this step is carried out, the infant being removed in a special incubator which is available for the purpose. Special cots are also supplied on loan to mothers who are nursing their infants at home.

A close liaison is maintained between the Matrons of the lying-in-hospitals and the Superintendent Nursing Officer in respect of premature births and before such an infant is discharged from the maternity hospital, the necessary information is passed on to the Superintendent Nursing Officer who, with her staff, accepts responsibility for the care of the child after discharge under the general direction of the Family Doctor.

Frequent visits are made by one of the district health visitors until the infant reaches normal weight and after this stage the usual routine visits are made as in other cases.

CARE OF CHILDREN UNDER SCHOOL AGE

Child Welfare Centres

There are seven Centres in the town and in addition to the normal work, each Clinic distributes the dried milk and vitamin foods issued by the Ministry of Health. As in the past the Ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1965 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

The seven Welfare Centres are so situated that they provide a convenient service for mothers living in any part of the town.

One session each week is held at the Centres at Ainsdale, Crossens, Derby Road and Marshside and two sessions each week are held at the Centres at Hampton Road, Lincoln House and Poulton Road.

It is hoped that the new Centre in Ainsdale will be opened sometime in 1966 and it will replace the temporary Centre which has been held for many years at the Methodist Church there.

This is a further step to implement the Council's policy to replace all temporary Child Welfare Centres by purpose-built Centres. The ones still to be dealt with in this way are those at Derby Road and Marshside Road.

Mothers' Club

The activities include lectures, demonstrations, handicrafts, dressmaking and keep-fit classes; in addition trips are arranged at times other than the usual day of the weekly meeting. Miss Phillips continues to organise the club and she is helped by a Committee formed by the mothers. The handicraft work has been supervised by Mrs. Phillips who very kindly volunteered to do this work for the club. Other developments include arranging for a "sick visitor", who is a member of the club, to call on any other members who are seriously ill to see whether any help can be provided, and visiting mothers in the area who have new babies.

It is obvious that this club is making a very valuable contribution to the health services which are available in the area, and the enthusiasm of the mothers and the regular large attendances at each meeting clearly show that the scheme has been appreciated. Miss Phillips originated the idea of forming such a club and she deserves the highest praise for all the hard work she has given, in her own time, to ensure that the venture has been such a great success.

Dental Care and Treatment

Sessions are held each week at 2 Church Street for expectant and nursing mothers and children under 5 years of age who are not attending primary schools maintained by the local Education Authority.

When dentures are required by nursing mothers, arrangements are made with private dental mechanics in the town.

DENTAL CLINIC—YEAR 1965

Number of patients examined and treated

	No. of persons examined during the year (1)	No. of persons who commenced treatment during the year (2)	No. of courses of treatment completed during the year (3)
Expectant and Nursing Mothers	19	18	11
Children aged under 5 and not eligible for school dental service	377	170	188

Classification of treatment provided

	Scalings and Gum Treatment (1)	Fillings (2)	Silver Nitrate Treatment (3)	Crowns and Inlays (4)	Extractions (5)	General Anaesthetics (6)	Dentures Provided		Radiographs (9)
							Full Upper or Lower (7)	Partial Upper or Lower (8)	
Expectant and Nursing mothers	7	29	1	5	24	6	2	—	1
Children aged under 5 and not eligible for school dental services	10	480	80	—	134	55	—	—	—

Distribution of National Welfare Foods

Quantities of National Welfare Foods Sold during 1965

	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
	Tins	Bottles	Bottles	Packets
HEALTH DEPARTMENT—				
Counter Issues	1,896	6,581	295	1,298
Issues to National Health Service Institutions	17	72	—	—
Issues to Day Nurseries	—	96	114	—
Total Sales from Health Department ...	1,913	6,749	409	1,298
CHILD WELFARE CENTRES—				
Ainsdale	225	2,035	148	161
Lincoln House	141	1,774	227	181
Crossens	85	675	37	55
Poulton Road	184	1,063	116	87
Hampton Road	231	1,911	208	219
Marshside Road...	120	1,339	152	97
Derby Road	85	844	105	37
Total Sales from Child Welfare Centres ...	1,071	9,641	993	837
GRAND TOTALS	2,984	16,390	1,402	2,135

Day Nurseries

There are two Day Nurseries in the town, one being in Talbot Street with accommodation for 60 children, and one in Bedford Park with accommodation for 40 children. The daily fees which had been charged since 1st October, 1962, viz: 2/- minimum and 9/6 maximum were amended to 10/- maximum, the minimum remaining the same, as from August, 1965.

These fees, however, may be reduced in cases of financial hardship and at the end of the year, the average daily payment made by the mothers was 4/7d. for each child.

It is pleasing to note that all the four students who completed the two year course which commenced in September, 1963 and terminated in 1965, were successful in obtaining the Certificate of the National Nursery Examination Board.

The Nursery Nurses' Training Scheme was continued in 1965 in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1965.

Attendances at the Day Nurseries during 1965

	Southport	Bedford Park	Totals
Number of places provided	60	40	100
Total attendances	13527	8530	22057
Number of days open	254	254	254
Average daily attendance	53	34	87

Physiotherapy Service

Physiotherapy classes were held throughout the year for expectant mothers and also for mothers attending the post-natal clinic There seems to be no doubt that these are of great benefit to mothers.

Relaxation Classes—Year 1965

	Ante-Natal	Post-Natal
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	56	483
Christiana Hartley Maternity Hospital	87	733
District cases	4	1
Attended Physiotherapy only	8	5
Total No. of cases	155	1,222
No. of attendances during the year	299	1,224
No. of sessions held by physiotherapist during the year ...	44	44

Care of Unmarried Mothers

Unmarried mothers who seek the help of the Department are referred to the Obstetric Specialist at the ante-natal clinic at 44 Hoghton Street, and arrangements are then made for the confinement to take place either in the girl's own home or in a maternity hospital. She is also advised to continue to attend either the ante-natal clinic at 44 Hoghton Street or the appropriate hospital ante-natal clinic.

At the same time, the mother is seen by the Moral Welfare Worker so that if necessary appropriate arrangements can be made for residential ante and post-natal care. In such cases the Health Authority will accept responsibility for the maintenance of the mother in a voluntary home usually for 6 weeks during the ante-natal period and up to 13 weeks during the post-natal period. The amount paid by the Health Committee to the voluntary home is the total cost of the maintenance less any payment which the mother is able to make towards her keep.

The Moral Welfare Worker co-operates with the Superintendent Nursing Officer, so that the Health Visiting Staff can keep in touch with the girl both before and after the baby is born. During the year, the Moral Welfare Worker dealt with 93 new cases and the Health Committee paid the maintenance costs in voluntary homes for 8 mothers during the ante and post-natal period.

ATTENDANCES AT CHILD WELFARE CENTRES—YEAR 1965

	Marshside	Hampton Road	High Park	Lincoln House	Crossens	Derby Road	Ainsdale	TOTAL
No. of children who attended during the month who have not attended previously this year:								
Born in 1965 ...	65	182	133	147	54	114	92	787
1964 ...	80	174	149	144	75	134	95	851
1960-63 ...	130	272	289	321	123	198	212	1,545
TOTALS ...	275	628	571	612	252	446	399	3,183
Total attendances during the year	1,831	3,669	3,011	3,311	1,726	2,448	1,834	17,830
No. of sessions during the year	47	94	94	94	47	47	47	470
Average attendances per session	39	39	32	35	37	52	39	39
No. of children referred for special treatment or advice as a result of a medical examination ...	1	15	4	16	2	12	3	53
No. of children placed on "at risk" register	13	47	47	22	14	25	25	193
No. of sessions by:								
Medical Officers ...	47	94	94	93	47	46	43	464
General Practitioners employed on sessional basis	—	—	—	—	—	—	4	4
Hospital Medical Staff	—	—	—	—	—	—	—	—
Health Visitors (with doctor)	94	272	188	224	94	154	94	1,120
Health Visitors (without doctor) ...	—	—	—	1	—	1	—	2

DISTRICT MIDWIFERY

The staff consists of a non-medical Supervisor of Midwives and three full-time midwives. All the staff are fully qualified to administer analgesia, i.e. gas and air and trilene, and are in possession of the necessary apparatus. Patients wishing to book for home confinement may do so at the Ante-Natal Clinic, 44 Hoghton Street, or directly with the midwife for the area in which they live. Regular visits are made by the midwives irrespective of having engaged a doctor to attend under the Maternity Medical Service. Arrangements can also be made for all patients to have routine blood tests carried out. The domiciliary midwives also visit certain patients who have been delivered in hospital but have been discharged home before the 10th day. Notification of these discharges is sent to the Health Department by the Matrons of the individual Maternity hospitals.

A number of the doctors conducting their own ante-natal Clinics have the assistance of the domiciliary midwives at these clinics. In this way a firm liaison is formed between doctor, midwife and patient, which is invaluable to the patient's welfare.

The case load is not considered to be large and no night rota system is in operation because it is felt that in these cases each midwife prefers to deal with her own patient.

DISTRICT MIDWIFERY—YEAR 1965

No. of confinements attended by district midwives:	
Doctor not booked	—
Doctor booked...	120
TOTAL	120
Premature Babies ($5\frac{1}{2}$ lb. or under):	
No. born at and being nursed at home	7
No. born at home and transferred to hospital	2
TOTAL	9
No. of cases delivered in hospitals and other institutions but discharged and attended by district midwives before 10th day...	261
No. of home visits made by district midwives during the year	4727
No. of supervisory visits made by non-medical Supervisor of Midwives during the year	15

Midwives in Private Practice

During the year two private midwives notified their intention to practise on the district.

Maternity Nursing Homes—The following table shows the number of maternity cases dealt with by private nursing homes during the year:—

Number of deliveries	4
Number of practising midwives employed at 31st December, 1965	2
Number of midwives above who are qualified to administer gas and air analgesia	—

Maternity Hospitals

The two maternity hospitals in the town are administered by the Southport and District Hospital Management Committee and the following table shows the number of patients during 1965. These figures are for residents and non-residents of Southport.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of patients	894	460	1354*
(2) Number of patients in (1) above for whom medical aid was summoned ...	188	2	190
(3) Number of practising midwives on the staff at the end of the year... ...	11	8	19†
(4) Number of midwives in (3) above who are qualified to administer gas and air analgesia	11	8	19

*Includes 901 Southport residents and 453 non-residents. †14 full-time and 5 part-time.

Distribution of Maternity Cases

The following table shows the percentage of maternity cases dealt with during 1965 by the various services, and similar figures are also shown for the previous year. These figures are for mothers who were resident within the area of the Southport County Borough.

	1964		1965	
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	134	12·6	120	11·7
Private Midwives	1	0·1	1	0·1
TOTALS (a)	135	12·7	121	11·8
Institutions				
Christiana Hartley Mat. Hospital	596	56·4	583	56·8
St. Katharines Maternity Hospital	324	30·6	318	30·9
Nursing Homes	1	0·1	4	0·4
Southport Infirmary	2	0·2	1	0·1
TOTALS (b)	923	87·3	906	88·2
GRAND TOTALS (a) and (b)	1058	100·0	1027	100·0

Training for the Second Part of the Certificate of the Central Midwives Board

During the year, midwifery training of this kind was continued. The scheme is a combined one, operated by the Southport and District Hospital Management Committee and the Southport and Preston Local Authorities. Some of the students do their domiciliary training in Southport and some in Preston. The school has done well but there are certain inherent difficulties, one of which is the relatively small number of Southport mothers who elect to have their babies at home.

Four pupils completed district training in the area during the year and one pupil was in training at the end of the year.

HEALTH VISITING

The Health Visiting Service provides general care for nursing and expectant mothers and young children and in addition, is available for the purpose of giving advice to persons of all ages in the town who are suffering from illness. The Health Visitors also assist families by providing them with information concerning the other health services which are available.

The present establishment consists of a Superintendent Nursing Officer, who also supervises the school nursing work, 1 Senior Health Visitor, 2 Clinic Nurses, 1 Tuberculosis Health Visitor, 2 Nurses for Elderly People, and 12 Health Visitors/School Nurses, making a total of 19.

The Health Committee agreed to sponsor one further student for Health Visitor training which began in September.

Each of the 12 Health Visitors/School Nurses is responsible for a district and based on the estimated figures for the year 1965, the average case load of the 0-14 years age group is 1,192.

Other work which falls to the lot of the Health Visitor is that of dealing with the non-medical after-care of patients discharged from Hospital, the arranging of home help and similar duties. These specially trained nurses are being increasingly called upon to undertake Health Education.

Work done by Health Visitors during 1965:—

	Cases visited by health visitors	Number
1	Children born in 1965	1,101
2	Children born in 1964	1,021
3	Children born in 1960-63	2,167
4	Total number of children in lines 1-3	4,289
5	Persons aged 65 or over	1,313
6	Number included in line 5 who were visited at the special request of a G.P. or hospital	587
7	Mentally disordered persons	7
8	Expectant Mothers	575
9	Other cases	196
10	Number included in line 7 who were visited at the special request of a G.P. or hospital	4
11	Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	119
12	Number included in line 9 who were visited at the special request of a G.P. or hospital	98
13	Number of tuberculous households visited	1
14	Number of households visited on account of other infectious diseases	10
15	Number of tuberculous households visited by tuberculosis visitor	150
16	Total number of effective visits made by Health Visitors and Nurses	19950

Attendances at Clinics and Centres by Health Visitors during 1965:—

Child Welfare Centres	1,160
Post-Natal Clinic, Christiana Hartley Maternity Hospital	52
B.C.G. Clinics	42
Geriatric Out-Patients' Clinic, Promenade Hospital	166
Paediatric Clinic, Southport Infirmary	116
V.D. Clinic, Southport Infirmary	22
Ante-Natal Clinic, St. Katharines Maternity Hospital...	51
Total no. of clinic attendances	1,609

Regular in-service training was given to members of the staff chiefly by means of the showing of films illustrated by short talks.

Mothercraft classes were held in schools and welfare centres. Lectures and informal talks have been given to various groups of persons and associations by members of the staff.

Co-operation with General Medical Practitioners and After-care arrangements

This is highly developed in connection with the geriatric service and works well because the two Health Visitors concerned attend the geriatric hospital clinic and are also in direct touch with individual Family Doctors. As regards general Health Visiting, it is planned that the District Health Visitors will be based in Welfare Centres in different parts of the town and be available directly to the Family Doctors in the area reporting either directly to them or acting as liaison officers with the Public Health Department, so that other ancillary services can be provided where necessary. Some interest has been shown by a small number of Family Doctors who would like the services of a Health Visitor in their own surgeries but this is more difficult to arrange.

Prevention of the Break-Up of Families

A Sub-Committee with representatives from the Health, Estates, Welfare, Children's and Finance Committees, is available to consider serious individual family problems, when it seems probable that the best solution can only be found by concerted action by a number of Committees.

Screening for Phenylketonuria.

The following table gives details of the tests which were carried out during 1965 :—

No. of Tests	No. positive to screening Tests	Results of further investigation	
		Phenylketonuria confirmed	Phenylketonuria not confirmed
1101	nil	nil	nil

HOME NURSING

The Home Nursing Service is a statutory duty of the Local Health Authority under the provisions of the National Health Service Act 1946.

Since 1948, the Southport Corporation has provided this service by an agency arrangement with the Southport and Birkdale District Nursing Society, a voluntary body which has existed in the town for many years and has provided district nurses. The Society has members who have served it for very many years and who have done extremely good work for the town.

These arrangements were terminated in August, however, and the Home Nursing Service became the direct responsibility of the Southport Corporation.

With the consent of the Charity Commissioners the buildings, furniture, equipment and motor cars were sold to the Corporation.

The practical day to day administration is carried out by the Superintendent who is frequently in touch with the department and who appoints her staff after consultation with the Chairman of the Health Committee and myself with subsequent confirmation by the Health Committee. Requests for nursing services are usually made directly to the District Nurses' Home at 52 Hoghton Street and are made in the main by general medical practitioners, by local authority staff, various voluntary bodies, hospitals and police, etc.

The present establishment is—a Superintendent, a Deputy Superintendent and 19 Nurses; domestic staff is also employed.

Apart from the Superintendent and her Deputy, very little use has been made during recent years of the residential accommodation by the nurses. Also it has been difficult to staff the Home from the domestic point of view with the result that the Superintendent has at times been hard pressed. The trend throughout the country at present is for district nurses not to live in district nurses' homes but to have their own flats or domestic premises away from their working environment.

It has been thought for some time that it would be eventually necessary to review the administration of the Home Nursing Service for two main reasons. Firstly to achieve a closer integration of the work of the district nurses with that done by the other branches of the Local Authority's personal health services, and in particular with the health visiting service and home help service. Secondly to consider the possibility of the Health Committee using the unoccupied accommodation at the District Nurses' Home at 52 Hoghton Street for other branches of the Local Authority's health service.

Work done by District Nurses during 1965:—

Total no. of new patients visited during the year (i.e. patients who have not been previously visited this year)	2,285
No. of patients who were aged:	
under 5 years at time of first visit this year...	25
over 65 years at time of first visit this year	1,523
Total No. of visits made by nurses during the year	74,307

No. of patients visited and total visits for years 1960 to 1965:—

Year	Total number of patients visited	Total number of visits
1960	2,366	60,090
1961	2,389	60,530
1962	2,345	57,113
1963	2,089	61,777
1964	2,153	64,690
1965	2,285	74,307

VACCINATION AND IMMUNISATION

The following are the suggested ages when children may be vaccinated and immunised against certain diseases:—

Age	*Vaccine*	*How Given*
1 to 6 months	Diphtheria, Tetanus and Whooping Cough	Three injections at intervals of four to six weeks.
7 to 11 months	Poliomyelitis	Three doses by mouth at intervals of four to eight weeks.
18 to 21 months	Diphtheria, Tetanus and Whooping Cough	One 'booster' injection.
1 to 2 years	Smallpox	One injection.
4 to 5 years	Diphtheria and Tetanus	One 'booster' injection.
(School entry)	Poliomyelitis	One dose by mouth.
8 to 12 years	Diphtheria and Tetanus	One 'booster' injection
Over 12 years	Smallpox	One re-vaccination injection.
Normally at 12 years or over	B.C.G. Vaccination against Tuberculosis	One injection if this is found necessary after a skin test.

Smallpox Vaccination

Smallpox vaccination was continued by the General Medical Practitioners as in the previous year on the same lines as for the diphtheria immunisation scheme.

Vaccination was also carried out at Child Welfare Centres and at the Health Department.

During the course of their normal visits, the Health Visitors are required to stress the importance of smallpox vaccination when the baby has attained the age of 12 months. Similar advice is also given at the appropriate times to mothers attending the Welfare Centres; information leaflets are distributed at the Centres and also during the course of home visits.

No. of persons vaccinated and re-vaccinated in 1965:—

Age at date of Vaccination	Number of Persons Vaccinated (or revaccinated during period)		Number of cases specially reported during period		
	Number vaccinated	Number revaccinated	Generalised Vaccinia	Post-Vaccinal Encephalo-myelitis	Death from other complications of vaccination
0-3 months	—	—	—	—	—
3-6 months	9	—	—	—	—
6-9 months	9	—	—	—	—
9-12 months	18	—	—	—	—
1	436	1	—	—	—
2-4	66	9	—	—	—
5-14	20	31	—	—	—
15 or over	13	99	—	—	—
TOTALS	571	140	—	—	—

Diphtheria Immunisation

When a baby has attained the age of 3 months, a letter is sent to the mother strongly advising her to arrange for the immunisation of her child. In addition, the Health Visitors are required to visit all mothers whose babies have not been immunised and to make every effort to ensure that the infant is protected against this disease. Posters and leaflets are displayed at Welfare Centres and all children admitted to the Day Nurseries must be immunised.

Follow-up letters are sent at the appropriate times, stressing the need for "re-inforcing" injections to maintain immunity throughout school life. Particulars are obtained from the schools each year showing the names of children not immunised and the School Nurses visit the mothers of such children with a view to persuading them to accept immunisation.

In addition to the work done by the General Medical Practitioners, regular immunisation sessions are held at the Health Department and children are also protected in this way at the Welfare Centres.

No. of Immunisations during 1965:—

Children born in years	1965	1964	1963	1962	1961	1956-1960	1951-1955	TOTAL
No. of children who completed a full course... ...	372	500	29	19	15	15	2	952
No. of children who received a secondary (booster) injection	—	146	273	23	104	440	185	1171

Immunisations done by	General Practitioners	Health Department Staff	TOTAL
No. of children who completed a full course	336	616	952
No. of children who received a secondary (booster) injection	394	777	1171

Poliomyelitis Vaccination

No. of vaccinations during years 1956 to 1965 inclusive:—

Age at 31st Dec., 1965	*Under* 5 *years*	5—16 *years*	16—25 *years*	*Over* 25 *years*	TOTAL
No. who have received two injections ...	1,309	8,639	7,166	8,452	25,566
No. who have received three injections ...	340	7,169	5,729	5,260	18,498
No. who have received four injections ...	1	3,757	5	4	3,767

No. of persons who received oral vaccine during the period April 1962, to December, 1965:—

Age at 31st Dec., 1965	*Under* 5 *years*	5—16 *years*	16—25 *years*	*Over* 25 *years*	TOTAL
No. who have received full course of three doses	3,237	425	324	546	4,532
No. who have received third dose after two injections	778	709	503	2,058	4,048
No. who have received fourth dose after three injections	528	2,475	47	80	3,130

B.C.G. Vaccination

No. of vaccinations for years 1956 to 1965:—

Year	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
No. Vaccinated: At. B.C.G. Clinics	45	27	42	56	43	36	34	35	28	23
Babies seen by the Consultant Paediatrician	9	9	24	35	27	28	32	20	37	18
School Children...	391	500	497	698	1037	787	872	716	728	710
TOTALS	445	536	563	789	1107	851	938	771	793	751

Whooping Cough Immunisation

No. of Immunisations:

Year of Birth of Child	No. of children immunised
1965	373
1964	497
1963	27
1962	16
1961	10
1956—60	7
1951—55	1
TOTAL	931

No. immunised in cases of whooping cough during years 1959 to 1965:

Year	*No of Cases*	*No. Immunised*
1959	113	19
1960	60	12
1961	34	2
1962	15	9
1963	151	44
1964	35	11
1965	38	20

AMBULANCE SERVICE

The Ambulance Service continues to be operated by the Fire Brigade under the direct control of the Fire and Ambulance Service Committee, although matters of policy are referred to the Health Committee and monthly information reports in respect of the Ambulance Service are submitted to that Committee.

The Chief Fire Officer is also the Chief Ambulance Officer. The Fire Brigade establishment is augmented by 20 men and 1 woman in consequence of the Ambulance Service commitments, but all personnel of the Brigade take part in both fire and ambulance duties. The Service operates a fleet of 6 ambulances and 3 sitting case cars.

No. of cases removed years 1961 to 1965:

	1961	1962	1963	1964	1965
Total No. of Cases ...	43,927	43,145	43,135	43,546	43,776
Other Work	1,007	878	994	1,002	1,267
GRAND TOTAL ...	44,934	44,023	44,129	44,548	45,043
Mileage	140,057	136,531	137,006	142,520	153,785

Every endeavour continues to be made to keep pace with demand. Any case which may not appear to necessitate an ambulance is checked and the fullest use is made of trains, joint journeys carrying several patients, and other Authorities' ambulances. Unfortunately a large amount of "out of town" work is done where the patient can travel by no means other than ambulance and this restricts one vehicle to one case for several hours, sometimes a whole day, leaving the ambulances left in the Borough working at increased pace to cope with the remainder of the cases.

Railway facilities are used whenever possible but the curtailment of railway services and also the design of new coaches which are difficult for the accommodation of stretcher cases and also for the reservation of compartments for sick persons, will reduce the availability for rail travel in future.

The Chief Officer, the Secretary of the Hospital Management Committee and his staff, meet periodically to solve mutual problems affecting the Service. These meetings, together with liaison with Doctors through the Medical Officer of Health, have reduced wastage and abuse to an absolute minimum.

PREVENTION OF ILLNESS—CARE AND AFTER-CARE

General

The general work done in regard to the prevention of illness, care and after-care is shown in the sections of this report dealing with the Health Visiting, Mental Health and Tuberculosis Services.

Nursing Equipment

The following equipment is available on loan.

*Air Rings
*Backrests
Bath Aids
Bath Seats
Beds—Cardiac
Beds—Hospital
*Bed Cradles
*Bed Pans
*Bed Table
*Bells
Cantilever Table
Commodes
Cot Sides
Crutches
Dunlopillo mattresses
Electric Blanket
Electric Page Turner
Elsan Closets
Enuresis Alarms
Incontinence Pads
Lifting Gear
*Mackintosh Sheets
*Portable Oxygen Apparatus
Toilet Aids
*Urinals
*Walking Sticks
Wheelchairs

*(These articles are issued from 52 Hoghton Street).

A small charge is made for the more expensive kinds of equipment but this charge may be reduced or cancelled in cases of hardship.

During 1965 nursing equipment was supplied to 763 patients as compared with 507 in the previous year. This increase was mainly due to the large number of elderly patients who had to be supplied with wheelchairs, commodes and incontinence pads. Many of these elderly patients were referred to the Department for this kind of help after being seen by the Consultant in charge of the Geriatric Clinic at the Promenade Hospital.

Incontinence Pads

The incontinence pad service for cases of illness being nursed at home was started in February, 1964 and the first delivery was made to 5 patients. The demand for the service increased throughout 1965 and during the year 224 patients were supplied with nearly 28,500 pads. At the end of the year, 39 patients were receiving this kind of help. The pads are only supplied at the request of either the patient's own doctor, the district nurse or by the two nurses responsible for the geriatric work. No charge is made to patients who are receiving National Assistance but a charge of 3/6d. per week is made to other patients; this charge may be reduced or cancelled where there is financial hardship.

The disposal of the used pads has not caused any difficulties and either the district nurse or the geriatric nurse has been made responsible for ensuring that satisfactory disposal arrangements are available for every patient using the service. The service has been of great help, both to the patients and relatives and also to the district nurses, and has made it possible for a number of these patients to be nursed at home when they would otherwise have had to have been admitted to hospital.

Occupational Therapy

During the year, occupational therapy was provided for 2 geriatric patients and 1 physically handicapped patient and a total of 113 home visits were made by the occupational therapy staff.

Chiropody

(a) *Service for the Elderly*

Prior to the 1st April, 1960, a chiropody service for the elderly had been provided for many years by the Southport Voluntary Old People's Welfare Committee, and they provided treatment both at clinics and also in patients' own homes. Since 1960 the Voluntary Organisation has continued to provide the service as agents of the Corporation, and the Corporation is responsible for repayment of the net expenditure involved.

The general direction is controlled by a joint sub-committee, 5 members being appointed by the voluntary organisation and 5 members by the local health authority. This sub-committee meets at quarterly intervals to receive reports of the work done and also to approve the financial statements. There is close co-operation between the officers who are concerned with this service both in the health department and from the old people's welfare committee, and the general arrangements for the scheme seem to work satisfactorily.

The service is available for Southport residents who are 60 years of age or over and the minimum charge for those not receiving supplementary pensions is 3s. 0d. per treatment. Those who are receiving supplementary pensions, however, are charged 1s. 6d. per treatment. If for any reason it is considered that these fees would cause financial hardship in any particular case, the charge may be reduced or cancelled.

No. of treatments during 1965:

	Year 1964	Year 1965
No. of clinics held	768	760
No. of attendances made by patients	8143	7368
Average attendance per clinic session	10.6	9.7
No. of treatments in patients' own homes	1924	1708

The need for this service continues to grow, and will do so as long as the number of older residents in the town continues to increase.

(b) *Expectant Mothers and Handicapped Persons*

The arrangements continued throughout the year whereby expectant mothers and handicapped persons in need of chiropody treatment and unable to afford to go to a private chiropodist, could be referred to Mr. W. Rogans who is also responsible for the School Health Service Chiropody Clinic.

During 1965, five physically handicapped persons made 52 attendances at Mr. Rogans' clinic. No expectant mothers were referred during the year.

Sickroom Helpers Scheme

Alongside the Home Help Service is the Sickroom Helpers Scheme. This is a little known service which is not often required, and there are only 4 casual sickroom Helpers on the staff. The purpose of these helpers is to give relief during the night to relatives of patients who are being nursed at home usually while awaiting admission to hospital. The helpers are directly responsible for the care of the patient during their time on duty and must be prepared to obtain medical help should the occasion arise and help in any other way to relieve the anxiety and distress of the patient and the burden on relatives.

The hours during which the Service is provided are 10 p.m. to 8 a.m., and the cost is 3/3 per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During 1965, sickroom help was provided for 18 patients, as compared with 19 in the previous year. The number of hours worked by the helps during the year was 756.

Co-operation with Hospitals

Throughout the year, the Medical Social Workers of the local Hospitals continued to refer the names of patients to the Health Department where the services of a district nurse or home help seemed to be required. 587 patients were dealt with in this manner and the necessary help was arranged as compared with 268 patients in the previous year.

The members of the Health Visiting staff attended certain hospital clinics and these arrangements have formed an invaluable link between the hospital service and the home visiting which is done by the Health Visitors. The hospital clinics concerned are as follow:—

Post-natal clinic held at Christiana Hartley Maternity Hostpital.

Geriatric clinic held at the Promenade Hospital.

Paediatric clinic held at the Southport Infirmary.

V.D. clinic held at the Southport Infirmary.

Tuberculosis (Patients) clinic held at the Southport Infirmary.

The Medical Officer of Health continued to be in consultant charge of the infectious disease beds at the New Hall Hospital; the Deputy Medical Officer of Health and one of the two Assistant Medical Officers helped with the fever hospital work.

By arrangement with the Liverpool Regional Hospital Board, the Senior Hospital Medical Officer at the New Hall Hospital continued to give three-elevenths of his time to preventive medical work in connection with tuberculosis.

The Medical Officer of Health and the Deputy Medical Officer of Health are members of the Medical Advisory Board to the local Hospital Management Committee and the Medical Officer of Health also acts as Assistant Honorary Secretary to the Medical Advisory Board.

Convalescent Home Care

This service is only provided on the recommendation of the patient's general practitioner and it is not intended for those patients who can be provided with convalescent care under the Hospital Authority's arrangements.

During the year, 14 Women and 1 man were sent to convalescent homes, the details being as follow:—

Disability	No. of Weeks
General debility	2
Following operation for Glaucoma ...	2
Mild anxiety state	2
Emphysema and bronchitis	2
Following operation for Glaucoma ...	2
Post natal depression	2
Longstanding anxiety state	2
Diabetic	2
Pernicious anaemia	1
Parkinsonism	2
Depressed state	2
General debility	2
General debility	2
Chronic bronchitis and emphysema ...	2
General debility	2

Marriage Guidance

During the year the Health Committee agreed to renew the annual Grant to the Merseyside Marriage Guidance Council on which the Southport Corporation is represented by one of the lady members of the Health Committee.

HOME HELP SERVICE

The Home Help Service is designed to help those in urgent need of assistance in the home, such as expectant and nursing mothers who are unable to call on relatives to help; elderly persons who can no longer carry out all the work required; and homes where illness has so upset the normal routine that help is required.

The duties consist of keeping the house clean; sometimes doing the necessary cooking and shopping; and if there are young children, attending to their needs. It must be understood however, that the work done is that which is absolutely necessary to keep the home going during a difficult period, and therefore the help is only temporary.

The Home Helps take a great interest in their old people and do many personal things for them such as visiting them if in hospital; taking them out in bath chairs if the weather is good; doing their washing and mending, and even taking a cooked meal in to them during the weekends. All these duties are entirely voluntary and are done out of working hours. The hours worked are as follow:—

Monday to Friday: 9 a.m. to 12 a.m.; 2 p.m. to 5 p.m.

Saturday: 9 a.m. to 12 a.m.

The cost of the Service is 4s. 6d. per hour but this charge may be reduced or cancelled, where there is financial hardship.

No. of persons helped during 1965:—

	Home help to Households for persons						
	aged 65 or over on first visit in 1965 (1)	aged under 65 on first visit in 1965				Total (6)	Total hours worked by helps during the year (7)
		Chronic sick and tuberculous (2)	Mentally disordered (3)	Maternity (4)	Others (5)		
Number of cases	682	49	4	55	89	879	89,902

No. of Staff employed at end of year	Whole time	Part time		Total Whole time equivalent
		No.	Whole time equivalent	
Home Help Organiser	—	1	.66	.66
Home Helps	6	73	41	47
No. of visits to homes by Organiser during the year				1,931
No. of persons interviewed at office during the year				1,135

MENTAL HEALTH SERVICE

Report on the work done during 1965.

The Mental Health Section Staff have to deal with some of the most difficult problems in medical work. In no section is the need for first class co-operation between hospital consultant, family doctor and local health authority staff, more essential. From the administrative point of view the difficulties are great: Southport has no psychiatric hospital accommodation within the town so that patients and staff have often to travel considerable distances to Ormskirk, Winwick, Rainhill and Deva hospitals, as well as sometimes even further afield. This absorbs much of the time of the Mental Welfare Officers, rather unprofitably from some aspects. A 24 hour 'on call' service is required and this is not easy to maintain with a total staff of three Mental Welfare Officers. It will be seen from the statistics that 889 patients were referred to the Health Department for investigation for mental trouble during the year and of these 371 had to be admitted to hospital for treatment. It seems likely that at least one additional mental welfare officer will be required in the future if the 'After Care' services are to develop in the way indicated in the 1959 Mental Health Act. Dr. Howie's 'After Care' Clinic has continued to do very good work during the year, and help has also been given to the patients attending by the supportive occupational therapy and social club facilities which are provided.

In July of this year Springbrook, a small home for subnormal children was opened in Meadow Lane, Ainsdale. It is a very pleasant house for staff and children. Parents too have expressed delight in it and we have been fortunate in receiving gifts from voluntary associations in the town.

The hostel for adults should be ready in the Spring of 1966.

A start has been made on the hostel for the mentally infirm but it is not expected that this will be in use till early 1967.

MENTAL HEALTH SERVICE

Mental Illness

Number of patients dealt with during 1965:

	Males	Females	Total
Patients:			
No. of admissions to hospital (Mental Health Act, 1959):			
— as informal patients (Sec. 5)	55	81	136
— for observation (Sec. 25)	54	120	174
— for treatment (Sec. 26)	3	24	27
— emergency application (Sec. 29)	14	20	34
— by court order (Sec. 60)	—	—	—
Total no. of admissions	126	245	371
No. of patients already in hospital under compulsory detention accepted as informal patients	29	77	106
No. of patients transferred from the Ormskirk & District General Hospital to other hospitals	3	26	29
No. of day patients taken to Ormskirk & District General Hospital	5	18	23
No. of patients referred to Health Department re acute mental illness...	194	383	577
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at 44 Hoghton Street	—	—	45
No. of patients seen at After-Care Clinics	41	387	428
Work done by Mental Welfare Officers:			
No. of home visits re acute mental illness	330	651	981
No. of domiciliary after-care visits	264	845	1,109
No. of visits to patients in hospital	158	300	458
No. of patients interviewed at the Office	238	482	720
No. of visits to the Psychiatric Clinic at the Southport Infirmary	33	63	96

MENTAL HEALTH SERVICE

Mental Illness

Occupational Therapy Work done during year 1965.

No. of patients	Mentally Ill
No. on register at beginning of the year	52
No. added during the year	87
	139
No. deducted during the year	75
No. on register at end of the year	64
No. of Home Visits	954
Sessions	
Consultant Psychiatrist's After-Care Clinic—44 Hoghton Street	21
Psychiatric Social Club—Hampton Road Centre ...	54
Craftwork—Lincoln House Centre	52
Craftwork—Poulton Road Centre	49
Industrial Therapy—44 Hoghton Street	113
Total No. of Sessions attended by Staff	289
No. of attendances made by patients	
Psychiatric Social Club—Hampton Road Centre ...	1,093
Craftwork—Lincoln House Centre	296
Craftwork—Poulton Road Centre	225
Industrial Therapy—44 Hoghton Street	873
Total No. of Attendances	2,487

Mental Subnormality

Cases dealt with in 1965:

Number of cases notified to the Department:—	
from the Local Education Authority under Sec. 57 Education Act, 1944 (amended) ...	—
from other sources	18
Total ...	18
Number of cases admitted to hospital:—	
for permanent care	10
for short term care	2
Total ...	12
Number of cases placed under Guardianship ...	None
Work done by Mental Welfare Officers:	
Number of patients seen at the Office	209
Number of domiciliary visits	227
Number of visits to the Training and Industrial Centre	106
Number of journeys made in connection with the work scheme at the Industrial Centre	243

Occupational Therapy

During the year 487 home visits were made to 11 mentally subnormal persons.

Training and Industrial Centre—Report for year 1965.

Number of cases on Register at beginning of year	49
Number of cases added to Register during year	11
	60
Number of cases taken off Register during year	6
Number of cases on Register at end of year	54
Number of sessions held during year	224
Number of attendances at Centre during year	9431
Average attendance per session	42.1

MENTAL HEALTH SERVICE

Number of patients referred to Local Health Authority during 1965

Referred by	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Under Age 16	16 and Over	
General Practitioners	1	—	81	251	—	—	3	2	—	—	—	—	—	—	—	1	—	1	339
Hospitals, on discharge from in-patient treatment	1	—	109	192	—	—	1	1	—	—	2	—	—	—	—	1	—	3	307
Hospitals, after or during out-patient or day treatment	—	—	38	54	—	—	3	2	—	—	—	—	—	—	—	—	—	—	97
Local education authorities	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—	—	3	—	3
Police and courts	—	—	15	22	—	—	—	2	—	—	5	—	—	—	—	—	—	5	44
Other sources	—	—	39	47	1	—	1	1	1	—	3	—	3	—	1	2	4	6	99
Total	2	—	282	566	1	—	10	6	1	—	10	—	4	2	1	4	7	15	889

MENTAL HEALTH SERVICE

Summary of Patients under Local Health Authority Care at 31st December, 1965

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16	16 and Over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
Total number	—	—	89	175	1	—	11	4	1	1	26	32	21	9	9	18	32	85	397
Attending day training centre	—	—	—	—	—	—	—	—	—	1	8	6	17	8	6	7	26	27	53
Awaiting entry thereto	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Residing in residential training centre	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Awaiting residence therein	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Receiving home training	—	—	1	63	—	—	—	—	—	—	—	4	—	—	—	5	—	9	73
Awaiting home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Resident in L.A. Home/ Hostel	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	4	—	4
Awaiting residence in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	4	—	—	—	1	8	—	13	13
Resident at L.A. expense in other residential homes/hostels	—	—	—	—	—	—	—	—	—	—	2	—	—	—	2	1	—	5	5
Resident at L.A. expense by boarding out in private household	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Receiving home visits and not included above.	—	—	88	112	1	—	11	4	1	—	16	22	—	1	1	5	2	44	262

MENTAL HEALTH SERVICE

Admissions to Guardianship of Local Health Authority or other Guardian during 1965

	Guardian	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total
		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over				
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Under Age 16	16 and Over	
Admissions to guardianship during the year	L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total number under guardianship at end of year	L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Number of patients awaiting entry to hospital, or admitted for temporary residential care at 31st December, 1965

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total
	Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Under Age 16	16 and Over	
In urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Not in urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—	3	2	1	—	5	1	6
Total	—	—	—	—	—	—	—	—	—	—	—	—	3	2	1	—	5	1	6
Number of admissions for temporary residential care (e.g., to relieve the family). To N.H.S. hospitals	—	—	—	—	—	—	—	—	—	—	—	—	2	1	—	1	3	1	4
To L.A. residential accommodation	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	3	—	3
Elsewhere	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	1
Total	—	—	—	—	—	—	—	—	—	—	—	—	6	1	—	1	7	1	8

MENTAL HEALTH SERVICE

Premises provided at 31st December, 1965

Age group provided for	Mental Category provided for	Day training Centres Including Special Care Units			Residential training Centres		Social Clubs or Centres		Homes or Hostels	
		Number of centres	Number of places Juniors	Number of places Adults	Number of centres	Number of places	Number of clubs or centres	Number of places	Number of homes or hostels	Number of places
Under 16	Mentally ill	—	—		—	—	—	—	—	—
	Mentally subnormal	—	—		—	—	—	—	1	10
16 and over	Mentally ill	—		—	—	—	1	60	—	—
	Mentally subnormal	—		—	—	—	—	—	—	—
Juniors and Adults	Mentally ill	—	—	—	—	—	—	—	—	—
	Mentally subnormal	1	40	35	—	—	—	—	—	—
	Total	1	40	35	—	—	1	60	1	10

Special units included above providing for the severely subnormal with gross physical handicaps or gross behaviour difficulties.	Units functioning as Groups within Day Training Centres	(a) Number of Units 1	Self contained units independent of Day Training Centres	(a) Number of Units —
		(b) Number of places 8		(b) Number of places —

Section III

CONTROL OF INFECTIOUS DISEASE

TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 20; of these 19 were found to be suffering from pulmonary disease, and 1 from non-pulmonary disease. The following table shows the age and sex of these patients together with similar information regarding the number of persons who died of tuberculosis during the year.

Age Periods (in years)	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1 ...	—	—	—	—	—	—	—	—
1 to 5 ...	—	1	—	—	—	—	—	—
5 to 15 ...	—	1	—	—	—	—	—	—
15 to 25 ...	1	4	—	—	—	—	—	—
25 to 45 ...	—	3	—	—	—	—	—	—
45 to 65 ...	4	2	—	1	—	2	—	—
65 to 75 ...	1	2	—	—	1	—	—	—
75 and over	—	—	—	—	—	—	—	—
Totals ...	6	13	—	1	1	2	—	—

Treatment Clinic

The 20 new cases came to the notice of the Department in the following ways :—

By primary notifications	11
By transfers from other areas	9
Total	20

All the cases for which primary notifications were received and all patients transferred from other areas were seen at the Treatment Clinic which is held at the Southport Infirmary. The total number of cases on the Clinic Register at the end of 1965 was 184, and 12 of these patients were found to have sputum containing tubercle bacilli. During the year, 52 Treatment Clinics were held and 288 visits were made by patients; the total number of X-ray examinations of patients was 262.

It should be mentioned that the Southport and District Hospital Management Committee is responsible for the organisation and administration of the Tuberculosis Treatment Clinics.

No. of New cases and Deaths for Period 1956 to 1965:

Year	New Cases		Deaths	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1956	61	—	—	—
1957	46	3	9	1
1958	62	6	6	1
1959	40	4	7	2
1960	33	—	4	—
1961	31	1	4	—
1962	42	4	4	—
1963	31	1	10	1
1964	22	2	7	1
1965	19	1	3	—

Contacts

During the year 399 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 305. None of the contacts was found to be suffering from pulmonary tuberculosis in 1965.

Domiciliary Visiting

A Health Visitor is employed by the Local Health Authority for the purpose of visiting cases in their own homes to give help and advice to patients and their families.

The following are the number of home visits made by this Health Visitor during the year:—

To tuberculous patients	638
To contacts of tuberculous patients	325
To other chest patients	11
Total Visits	974

In addition, the Health Visitor also attends at the Tuberculosis Treatment and Contact Clinics and this arrangement is very satisfactory as it provides a useful link between the Hospital Service and the Local Health Authority Service.

During 1965, the Health Visitor made 93 attendances at the Tuberculosis Clinics, and 1 attendance at B.C.G. Clinics.

Housing

The Points Scheme which is used for the purpose of selecting tenants for Corporation houses, makes special provision for tuberculous patients. Additional points are awarded when either the applicant or his wife, or any of their children, are known to be suffering from infectious tuberculosis. This concession is of benefit to those cases where improved housing accommodation is essential for the patient and his or her family.

Voluntary Tuberculosis Care Committee

The Southport Voluntary Tuberculosis Care Committee continued as in previous years to provide patients and their families with financial and other assistance. The Committee forms an essential part of the general scheme for tuberculous patients and all the medical and nursing staff who are engaged in this service are members of the organisation. The Tuberculosis Health Visitor in the Health Department acts as Hon. Case Secretary and the Chief Clerk undertakes the duties of Hon. Secretary and Treasurer.

During 1965 the Care Committee provided considerable financial and other assistance to patients and their families.

Mass Miniature Radiography Unit

A mobile x-ray unit of the Liverpool Regional Hospital Board carried out a survey in Southport during October and November, 1965.

A total of 5,374 people were x-rayed (2,498 males and 2,876 females).

Attendances at "open" sessions held at the Cambridge Hall and at the Health Offices numbered 1,929. Visits by the mobile x-ray unit to Hospitals, Factories and other establishments numbered 26.

One case of active pulmonary tuberculosis was discovered (female), and four cases of malignant neoplasm (three males, one female).

TUBERCULOSIS

No. of patients dealt with at the Treatment Clinic during the years 1961 to 1965 inclusive

	1961			1962			1963			1964			1965		
	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total
1. No. of patients on register at beginning of year	272	15	287	258	15	273	249	13	262	232	13	245	209	13	222
2. No. of patients added during the year:															
(a) primary notifications of new cases	17	1	18	27	3	30	23	1	24	10	2	12	10	1	11
(b) transfers from other areas ...	11	—	11	14	1	15	8	—	8	12	—	12	9	—	9
(c) lost sight of cases returned ...	2	—	2	1	—	1	—	—	—	—	—	—	—	—	—
TOTALS (1)	302	16	318	300	19	319	280	14	294	254	15	269	228	14	242
3. No. of patients deleted during the year:															
(a) died (from Tuberculosis)... ...	4	—	4	3	—	3	6	—	6	5	—	5	3	—	3
(b) transferred to other areas... ...	12	—	12	10	—	10	16	—	16	8	1	9	10	—	10
(c) recovered	18	—	18	23	5	28	7	—	7	24	1	25	37	2	39
(d) lost sight of or refused further assistance	5	1	6	7	1	8	10	—	10	1	–	1	3	—	3
(e) tuberculosis **not** primary cause of death	5	—	5	8	—	8	9	1	10	7	—	7	3	—	3
TOTALS (2)	44	1	45	51	6	57	48	1	49	45	2	47	56	2	58
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2) ...	258	15	273	249	13	262	232	13	245	209	13	222	172	12	184
5. Summary of new patients found during the year:															
(a) Primary notifications of new cases	17	1	18	27	3	30	23	1	24	10	2	12	10	1	11
(b) Transfers from other areas ...	11	—	11	14	1	15	8	—	8	12	—	12	9	—	9
(c) Patients found from death returns (figures **not** included in items (1) to (4) above) ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
(d) Lost sight of cases returned ...	2	—	2	1	—	1	—	—	—	—	—	—	—	—	—
TOTAL NUMBER OF NEW PATIENTS ...	31	1	32	42	4	46	31	1	32	22	2	24	19	1	20

VENEREAL DISEASES

At the end of the year, 140 new cases were under treatment at the clinic, as compared with 163 cases at the end of 1964. During 1965, non-venereal cases made 463 attendances.

An important feature of the prevention and treatment of venereal disease is the work which is done to ensure that patients attend for treatment at regular periods. So far as the female patients are concerned, this follow-up work is done by one of the Health Visitors; this Health Visitor is also present at the V.D. Clinic when patients are being seen by the Consultant Physician, and the arrangement is of great value in maintaining a close liaison between the district and clinic work.

As there is no suitable person on the staff of the Health Department to deal with the follow-up of male patients, an arrangement has been made with the Southport and District Hospital Management Committee for the male nurse at the V.D. Clinic to undertake these duties during his off-duty time on a repayment basis, and due to his efforts the number of male defaulters has been reduced to a minimum.

No. of new patients during 1965:

	Male	Female	Total
Syphilis	nil	2	2
Gonorrhoea	20	2	22
Non-Venereal Infections	57	59	116
TOTALS	77	63	140

No. of patients and attendances for period 1956 to 1965:

YEAR	SYPHILIS					GONORRHOEA		
	Number of new cases during the year			Number of cases on register at end of year	Total number of attendances during year	Number of new cases during the year	Number of cases on register at end of year	Total No. of attendances during year
	Congenital	Others	Total					
1956	3	7	10	49	1336	6	4	85
1957	—	7	7	55	1152	10	3	78
1958	—	5	5	48	1151	8	5	43
1959	—	1	1	45	657	10	4	73
1960	2	6	8	47	769	14	5	92
1961	1	9	10	46	867	15	3	83
1962	—	5	5	47	922	15	6	71
1963	—	4	4	50	1105	16	8	117
1964	1	3	4	45	611	27	7	143
1965	1	1	2	42	263	22	13	110

There is little evidence in Southport of any increase in the incidence of these diseases commensurate with that which has occurred in some parts of the country. A special effort was made during the year to improve the information available to the general public about the local facilities for treatment and advice and this will be continued.

INFECTIOUS DISEASES

Classification of Cases notified during the year 1965

Notifiable Disease	Number of Cases Notified Ages in Years							
	At All Ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 Upwards
Chickenpox	258	8	96	131	13	7	3	—
Dysentery	18	—	10	6	—	2	—	—
Encephalitis	1	—	1	—	—	—	—	—
Erysipelas	2	—	—	—	—	1	1	—
Food Poisoning	2	—	—	1	—	—	1	—
German Measles	160	7	66	70	11	6	—	—
Measles	570	27	338	198	4	3	—	—
Meningococcal Infection	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—
Pneumonia	9	—	1	2	1	—	5	—
Poliomyelitis	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—
Scarlet Fever	57	—	19	36	1	1	—	—
Tuberculosis	11	—	—	—	3	1	5	2
Whooping Cough	38	2	19	17	—	—	—	—
Totals	1126	44	550	461	33	21	15	2

INFECTIOUS DISEASES

Number of Notified Cases and number of Deaths for the years 1956 to 1965 inclusive

Notifiable Disease	Number of Cases of Infectious Disease Notified											Deaths from Infectious Disease										
	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	Total Cases for 10 years 1956 to 1965	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	Total Deaths during 10 years 1956 to 1965
Chicken Pox	498	746	173	383	656	445	697	333	956	258	5145	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	134	—	13	5	37	26	69	4	2	18	308	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	—	—	—	1	1	—	2	1	5	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	12	6	6	5	12	7	6	2	4	2	62	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	5	—	26	3	4	3	3	28	2	2	76	—	—	—	—	—	—	—	—	—	—	—
German Measles	110	169	86	70	91	231	2369	73	154	160	3513	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	813	476	124	1554	348	1107	546	482	980	570	7000	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infect'n	3	1	—	2	1	1	1	2	1	—	12	2	—	—	—	—	—	—	—	—	—	2
Ophthalmia Neonatorum	—	—	1	—	1	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	13	3	6	4	—	1	3	1	2	1	34	—	1	1	2	—	—	—	1	1	—	6
Paratyphoid Fever	1	—	—	—	—	—	—	1	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	37	41	12	21	14	17	32	7	10	9	200	50	52	45	28	51	67	66	88	47	56	550
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis	6	4	3	2	—	7	—	—	—	—	22	—	—	1	—	—	—	—	—	—	—	1
Puerperal Pyrexia	4	1	1	1	1	—	—	4	—	—	12	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	62	46	62	40	33	31	27	23	10	10	344	6	9	6	7	4	4	4	10	7	3	60
Scarlet Fever	26	40	53	144	46	29	25	21	23	57	464	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	2	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	198	63	50	113	60	34	15	151	35	38	757	—	—	—	—	—	—	—	—	—	—	—
TOTALS	1922	1596	616	2347	1304	1940	3796	1132	2181	1126	17960	58	62	53	37	55	71	70	99	55	59	619

Section IV

ADDITIONAL INFORMATION

ADDITIONAL INFORMATION

Blindness, Cerebral Palsy and Epilepsy

I am indebted to Mr. J. Sinnott, the Senior Welfare Officer, for the following details:

Blindness

There are 200 persons on the Blind Register and 65 others are classified as partially sighted. Many of these persons attend the Handicraft Classes and take part in other social activities at the Blind Social Centre, Gallie House, Hoghton Street, Southport.

Cerebral Palsy

There are no registered cases in the area.

Epilepsy

The following are the numbers of persons accommodated on account of epilepsy under arrangements made by the Welfare Committee:—

	Female	Male	Total
Windsor House, Southport	—	2	2
David Lewis Colony, Alderley Edge ...	1	—	1
Maghull Homes, Maghull	3	2	5
Langho Colony, Blackburn	1	1	2
West Hill, Southport	1	—	1
	6	5	11

HEALTH EDUCATION

During the year demonstrations have taken place in the Infant Welfare Centres and leaflets and posters have been used for publicity purposes.

Lectures have been arranged from time to time for a variety of organisations and on a number of subjects, and a sound projector was purchased last year to assist this work.

Film shows showing the relationship between smoking and health were shown to members of a Youth Club and to students attending a ModernSecondary School and also students attending a Technical College. Posters and leaflets dealing with venereal disease were used throughout the year.

Vastly increased effort and money is being put into the field of education. Much of this is required to keep pace with the growth and application of technical knowledge in the modern world. So far, not much emphasis has been placed upon health education but the staff of the Department are aware of an increasing demand for such instruction.

Social habits change and the amount of freedom from parental supervision, the ease of travel and the increasing material wealth of our population, particularly in the younger age groups, makes the need for instruction more necessary than ever. Preventive medicine makes a less dramatic appeal than curative medicine as currently portrayed on television screens. This is a pity but much could be done to encourage people to avoid disease provided they have the requisite knowledge and the will to apply it. Nothing in the field of health education is so useful as the personal instruction given by the interested family doctor, public health medical officer or nurse when speaking to the individual or to small groups, but there is a real place for the specialist health education officer as well.

It is hoped that eventually a health education section of the Department can be established as there is much work of the kind indicated waiting to be done. One has only to look at the figures of cases of preventable disease; of young, indeed very young, unmarried mothers, and of venereal disease incidence, to understand something of the position. There is provision in the Ten Year Plan for a Health Education Section in the Department but, on financial grounds, no firm date as to the appointment of a Health Education Officer and his staff has yet been agreed.

Nurseries and Child Minders Regulation Act, 1948

Private Nurseries

Two private nurseries registered by the Council under this Act were functioning at the end of the year, with provision for a maximum number of thirty-five children.

Nursing Homes

At the end of the year there were 16 Nursing Homes registered with the Local Authority, with 5 maternity beds and 194 others.

Only Nursing Homes registered by the Local Authority under Section 187 of the Public Health Act, 1936, are permitted to admit patients requiring nursing and medical attention.

The number of inspections made to nursing homes during the year was 46.

Nurses' Agencies

Any person who wishes to carry on an Agency for the supply of nurses must be licensed in accordance with the requirements of the Nurses Act of 1943, and the Nurses Agencies Regulations of 1945, and reports showed that the two existing establishments were being conducted in a satisfactory manner.

Persons in need of Care and Attention

No cases were dealt with during 1965 under the powers contained in Section 47 of the National Assistance Act, 1948.

Centres and Clinics

The following list shows the Centres and Clinics which were in operation at the end of the year:

Address	Day	Time
Child Welfare Centres:—		
Methodist Church, Ainsdale	Mondays	2 to 4 p.m.
North Road, Crossens	Wednesdays	2 to 4 p.m.
Lincoln House Birkdale	Tuesdays and Thursdays	2 to 4 p.m.
Poulton Road, High Park	Tuesdays	2 to 4 p.m.
do. do.	Wednesdays	2 to 4 p.m.
Hampton Road	Tuesdays	2 to 4 p.m.
do.	Thursdays	2 to 4 p.m.
Methodist School, Derby Road	Fridays	2 to 4 p.m.
Marshside Road	Thursdays	2 to 4 p.m.
Ante-Natal Clinics:—		
44 Hoghton Street	Fridays	9.30 a.m.
Post-Natal Clinics:		
Christiana Hartley Maternity Hospital ...	Tuesdays	9.30 a.m.
Tuberculosis Clinic:—		
Southport Infirmary	Mondays	2 to 4.30 p.m.
	Thursdays	9 to 11.30 a.m.
Chiropody Clinics:—		
44 Hoghton Street	Mondays, Tuesdays, Wednesdays, Thursdays	9 to 12.15 p.m. 2 to 4.0 p.m.
2 Church Street	Thursdays	9 to 12 noon

Medical Examinations

The following table shows the work done by the medical staff of the department during 1965 in regard to the medical examination of employees for the purpose of the Superannuation and Sickness Pay Schemes.

Department	Number of Medical Examinations			
	Super-annuation Scheme	Sickness Pay Scheme	Re-Examina-tions	Total
Corporation Departments:—				
Borough Architect	10	—	—	10
Borough Engineer	10	49	14	73
Borough Treasurer	20	—	3	23
Children's	1	1	—	2
Education	57	19	2	78
Estates and Baths	1	—	—	1
Fire Service	2	—	1	3
Flower Show	—	—	—	—
Health	20	31	—	51
Libraries	7	—	—	7
Lighting	—	—	—	—
Police	6	2	—	8
Publicity	—	1	2	3
Parks and Cemeteries	1	12	2	15
Town Clerk's	9	—	—	9
Transport	2	55	3	60
Water Board...	6	25	—	31
Weights and Measures	4	—	—	4
Welfare Services	2	8	—	10
Other Departments:—				
Electricity	6	—	—	6
District Nursing Association	6	—	—	6
Totals	170	203	27	400

In addition, 92 examinations prior to entry to a Teacher's Training College, were made in 1965.

Crematorium

The Southport Crematorium was opened in September 1959. The Medical Officer of Health continued to act as Medical Referee and the Deputy Medical Officer of Health and one of the Assistant Medical Officers of Health each carried out the duties of Deputy Medical Referee.

The number of certificates required in 1965 was 954.

Work done on behalf of the Children's Committee

During the year, 211 examinations were carried out on behalf of the Children's Committee, the details being as follow:

Examination of children who are boarded-out in foster homes ...	202
Admissions to Links Avenue Children's Home	6
Discharges from Links Avenue Children's Home	—
Medical Inspections—Links Avenue	3

Dr. Davison, the Deputy Medical Officer of Health continued to be responsible for the medical care of the children in the Home administered by the Children's Committee.

CIVIL DEFENCE

AMBULANCE AND FIRST AID SECTION

1. Recruitment position for year ended December, 1965:

Quarter	Active Volunteers				Non Active				Total
	Class A		Recruits		Class B		Reserve		
	Men	Women	Men	Women	Men	Women	Men	Women	
March	4	15	2	3	2	—	4	7	37
June	3	15	2	3	2	—	5	7	37
Sept.	3	15	2	3	2	—	5	7	37
Dec.	3	14	2	2	2	—	5	8	37

2. 16 Volunteers obtained Home Nursing Certiffcate.
   22 Volunteers took part in Course on Extended First Aid and Advanced Life Saving Techniques.

	Men	Women
3. Resignations during 1965	1	1
Recruited during 1965	1	1

Section V

ENVIRONMENTAL HYGIENE

SANITARY CIRCUMSTANCES OF THE AREA

Geology—The area consists of a bed of blown sand resting on peat, below which lies a bed of laminated blue clay. While the lower strata appears to be undergoing an exceedingly slow subsidence, any loss which might result from that circumstance is much more than made good by the continual accretion of sand derived from the Mersey. Land is gradually being reclaimed, both by natural and artificial means. The overlying sand on the east and south borders gradually thins out, exposing a margin of peat within the boundary of the area.

The elevation of the built-upon area varies from about 12 feet to 38 feet above Ordnance Datum.

Water—The water supply is provided by the West Lancashire Water Board which is responsible also for the supply to several neighbouring local authorities.

All the water supplied is pumped from wells and boreholes sunk in the sandstone rocks to depths varying between 180 and 1,000 feet.

The five pumping stations which contribute to the supply of Southport are situated five to ten miles south-east of the town.

Owing to the depth of the wells and the control exercised over their surroundings, the water, though hard, is consistently of the highest standard of bacterial purity. As a precaution, however, all water is chlorinated at the source.

At four pumping stations filters are installed to remove the iron and manganese present in the water as it comes from the wells. After filtration and chlorination the water is stored in covered reservoirs.

Samples are taken for chemical and bacteriological examination at regular intervals.

Town's Water Chemical Analysis, 5th November, 1965

	Parts per Million
Total solid matter in solution	412
Oxygen absorbed from Permanganate — in 15 minutes	0·16
Oxygen absorbed from Permanganate — in 3 hours	0·28
Ammonia	Nil
Albuminoid Ammonia	0·005
Nitrogen as Nitrates	0·09
Nitrogen as Nitrites	Nil
Combined Chlorine	29
Free Chlorine	Nil
Lead	Nil
Copper	0·05
Zinc	Nil
Total Iron	0·06
Carbonate Hardness (as Calcium Carbonate)	196
Total Hardness (as Calcium Carbonate)	286

(p.H. value: 7.3)

Town's Water, Bacteriological Examination, 4th January, 1965

Faecal Coli per 100 ml. in water examined ... ... Nil

Total coliform organisms per 100 ml. in water examined ... ... Nil

This and other tests indicate that the water is highly satisfactory. Fluoride is present in quantities of approximately 0.1 parts per million.

Water supply to houses:—

Particulars	Number of houses	Mid Year Estimate of Population
Mains supply, provided by the West Lancs. Water Board	27371	79976
Water supply from sources other than specified above	2	4
TOTALS	27373	79980

Public Baths—The Victoria Baths near the Pier have ample bathing accommodation. There are three sea-water swimming baths, 40 slipper baths, "Pine Bubble Baths" and a suite of Turkish and Russian Baths. The number of attendances during the twelve months ending 31st December, 1965 was 307,824.

In June 1965, additional filtration plant at the Sea Bathing Lake was brought into operation. The four horizontal filters, 15-ft. x 8-ft. were augmented with a further five filters, a 125% increase. The filtration area is now 1,080 sq. ft. The H.P. was increased from 2-42 H.P. Motors to 2-85 H.P. Motors, reducing the turnover period from 16 hrs. to $5\frac{1}{4}$ hrs. The Lake capacity being 1,400,000 galls. A 50 H.P. Motor and pump are available to operate when the demand is low.

The development gave an immediate improvement in the clarity of the water, making it more easy to attain the chlorine content required by the Ministry of Health with readings between 0.2 and 0.5 parts per million, but difficulty was experienced in maintaining these figures, this being due to a general leakage, which in turn necessitated a make-up of approximately 75,000 gallons a week. Re-inforcement is to be undertaken so as to avoid future loss through the cemented floor of the bath.

The dressing room accommodation has been increased by the addition of 59 cabins for male bathers, and 37 for the ladies.

The cost of this modernisation involved a capital expenditure of £42,000.

The gross attendance in 1965 was 162,185, of which approximately one third were spectators. This was a very poor year. In 1959 the gross attendance was 416,516.

The bathing water at the Victoria Baths is purified in the same manner as that employed at the Sea Bathing Lake, but the turn-over period in each bath is approximately three hours.

Both chemical and bacteriological tests are made on the swimming bath water. The chemical analysis consists of the estimation of the pH Value, nitrites, free ammonia and chlorine content which consists of free residual chlorine and chloramines.
The sample should comply in all respects with the Ministry of Health recommendations.

Bacteriological examination involves the estimation of the number of coliform bacilli in 100 millilitres of the water and also the number of Bact. coli (type 1) in a similar volume. No organisms of either type should be present. A Plate Count is also determined. No Plate Count should show more than 100 colonies per millilitre.

Fifteen chemical estimations of chlorine content of the water from the Sea Bathing Lake were made of which ten were unsatisfactory. Four of the fifteen samples submitted for bacteriological examination were found to be unsatisfactory. It is anticipated that the new purification plant will result in future samples complying with the Ministry's standards.

At the Victoria Baths all four samples of water submitted for chemical examination proved satisfactory as did the three samples examined bacteriologically.

Satisfactory Chemical Sample of Bathing Water

Taken at the Victoria Baths on 5th April, 1965

Appearance	Clear and bright. Colourless. Minute trace of flocculent matter.
pH Value	7.2
Nitrite	Nil
Free Amonia. Parts per million	Nil
Free Residual Chlorine (Free chlorine plus Chloramines) Parts per million	0.67

Result—Satisfactory

Satisfactory Chemical Sample of Bathing Water

Taken at the Sea Bathing Lake on 28th July, 1965

Appearance	Clear and bright. Colourless. Minute trace of flocculent matter.
pH Value	7.8
Nitrite	Faint Trace
Free Amonia, Parts per million	0.01
Free Residual Chlorine (Free chlorine plus chloramines) Parts per million	0.41

Result—Satisfactory

Report on Bacteriological Examination of Bathing Water

at the Sea Bathing Lake on 28th July, 1965

Location of Sample	Probable numbers per 100 ml.		Plate Count Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
South end of the Lake ...	0	0	5 Satisfactory

Report on Bacteriological Examination of Bathing Water

at Victoria Baths taken on 10th June, 1965

Location of Sample	Probable numbers per 100 ml.		Plate Count Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Premier Plunge	0	0	0 Satisfactory

PUBLIC BATHS—ATTENDANCES 1962 TO 1965

Year	Number of Persons Attending			
	Indoor			Open Air
	Victoria Baths (Opened 1836) (Remodelled 1926)	Canning Road Baths (Opened 1903)	Compton Road Baths (Opened 1926)	Bathing Lake (Opened 1928)
1962	260525	4396	4165	143999
1963	278676	4357	3869	201439
1964	311201	4196	3647	179297
1965	307824	3820	3105	162185

PUBLIC CONVENIENCES

The Special Committee appointed to look into the question of improving the standard of public conveniences in the Borough met during the year and made certain recommendations to the Town Council.

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 2,410 enquiries in respect of properties and sites in the Borough.

Sewage Disposal—The Sewage Works at Bank End, Crossens, deals with over two-thirds of the sewage passing into the system, and is currently being modernised.

The system of de-odourising the air when the wind direction is from the sea appeared to act satisfactorily.

The new Works at Ainsdale have materially helped in the development of the district and an average daily flow of 350,000 gallons is now dealt with.

The effluent from the Bank End Works is discharged into the sea and it is worthy of note that Southport's beach has been described in the National Press as one of the very few "clean" ones.

The sludge from both Works is disposed of by either drying and removal by farmers, etc., or lagooning, and subsequent ploughing.

The Borough Engineer is responsible for the operation of both these Works.

Drainage—Complaints of blocked drains totalled 2,396 and of these 1,769 were cleared, free of charge, by workmen employed by the Department; 462 cases of defective drains were dealt with under the supervision of the Public Health Inspectors, the work being undertaken by the Borough Engineer's Department.

DRAIN STOPPAGES REPORTED DURING YEAR 1965

Number Reported	Number Not Confirmed	Number Cleared No Charge	Number Cleared On Orders
2,396	165	1,769	462

Improvements in Sanitation—During the year the task of abolishing Bristol Closets in the Borough has continued. In 62 cases, statutory notices were served requiring owners to carry out the conversions.

Household Refuse—The work of collection and disposal of refuse is the responsibility of the Borough Engineer.

Pest Control—In addition to the destruction of rats and mice, the advice of the Health Department's technical staff is sought on many other occasions where pests such as cockroaches, crickets, flies, bugs, wasps and other insects are involved. Information has been given and in many cases the work of exterminating these pests has been undertaken for the complainants.

Pet Animals—No contraventions of the Pet Animals Act were observed.

Schools—The regular inspection of sanitary arrangements at the schools has continued, and the standard of cleanliness has been well maintained. It is hoped to secure an improvement in the type of sanitary accommodation at some of the Church Schools.

Hostel—There is one common lodging house in the Borough which provides frugal accommodation for men. While the accommodation is in no way pretentious it is clean.

Caravans—The Caravan Sites and Control of Development Act, 1960, came into force on the 29th August, 1960.

Number of licensed sites for holiday caravans	4
Total number of caravans permitted	113

Two of these sites are in use.

PUBLIC MORTUARY

The mortuary facilities in the town at Duke Street Cemetery, though improved in 1956, cannot be regarded as of the type and standard required in a modern County Borough. The buildings are old and have the disadvantage that the post-mortem room is separated by some distance from the mortuary so that it has proved to be difficult to screen the premises adequately. The provision of a modern mortuary has been discussed but no decision has yet been made.

Throughout the year 230 bodies were received at the Mortuary and, of these, 193 were submitted to a post-mortem examination.

FACTORIES

Sections 1 to 7 of the 1961 Factories Act are administered by local authorities in all factories where mechanical power is not used, and Section 7 is administered by them in all factories.

Working conditions such as cleanliness, overcrowding, temperature, ventilation and drainage of floors are dealt with under these sections of the Act and sanitary conveniences are referred to specifically in Section 7 of the Act.

Premises	Number on Register	Number of inspections (1) Written intimations (2)	
		1	2
Factories (other than domestic factories) where motive power is not employed	18	—	—
Factories where motive power is employed ...	419	265	12
Outworkers employed in finishing of wearing apparel	35	35	—
No. of building sites inspected	13	13	—

Prevention of Damage by Pests Act, 1949

Work done during year 1965

	Type of Property				
	Non-Agricultural				Agricultural
	Local Authority (1)	Dwelling-Houses (including Council Houses) (2)	All other (including Business Premises) (3)	Total of Columns (1), (2) and (3) (4)	(5)
Number of properties in Local Authorities District	307	27,371	5,149	32,827	110
Total number of properties inspected as a result of notification	89	224	169	482	28
Number of properties found to be infested by:—					
Common Rat Major ...	2	—	—	2	—
Minor ...	37	52	47	136	10
House Mouse Major ...	—	—	—	—	—
Minor ...	49	73	65	187	—
Total number of properties inspected in the course of Survey under the Act... ...	86	608	601	1,295	137
Number of such properties found to be infested by:					
Common Rat Major ...	1	—	—	1	—
Minor ...	12	7	11	30	7
House Mouse Minor ...	21	33	35	89	—
Total number of properties otherwise inspected	28	61	42	131	—
None of the properties in this Section was found to be infested					
Total inspections carried out including re-inspections ...	203	893	812	1908	175
Number of infested properties	122	165	158	445	17
Number of treatments carried out	166	172	182	520	17
Number of "Block" control schemes carried out	—	—	—	—	—

The above table indicates that 1,908 visits were made to properties in the Borough resulting in 445 infestations being discovered. In addition, 175 inspections were made to agricultural properties and 17 infestations were found. Each of these cases was treated by the Local Authority's Rodent Officer and re-inspections were carried out.

PUBLIC HEALTH INSPECTORS

Summary of Complaints and Visits made during year 1965:—

Nuisances

COMPLAINTS INVESTIGATED—	
Choked and defective drains	2,240
Housing defects	212
Ditches and watercourses	6
Smoke emission	30
Noise	60
Other nuisances	908
Total No. of complaints ...	3,456

NOTICES—		
Served	Preliminary, 295	Statutory, 87
Abated	Preliminary, 366	Statutory, 37

VISITS—	
To Premises:	
Dwellinghouses	7,891
Shops	2,849
Offices	154
Factories and workshops	265
Dairies	284
Food preparing premises	2,801
Ice Cream premises	217
Other premises	3,674
Total No. of Visits	18,135
Regarding:	
Drainage	2,020
Conversion of closets	855
Ditches and watercourses	38
Rats, mice and other vermin	3,457
The Housing Acts	900
Rent Acts	7
Food Hygiene Regulations	4,480
Works in progress	275
Other matters	9,114

Food and Drug Samples—Year 1965

SAMPLES OBTAINED FOR BACTERIOLOGICAL EXAMINATION—	
Milk	352
Ice Cream	41
Other Foods	10
Drinking Water (town's main)	5
Swimming Bath Water	18
Other Water	—
Total No. of Samples	426
SAMPLES OBTAINED FOR CHEMICAL ANALYSIS—	
Milk	171
Other Food	109
Drinking Water (town's main)	5
Swimming Bath Water	18
Total No. of Samples ...	303

Rag Flock and Other Filling Materials Act, 1951

Registration of premises where the manufacture of upholstered articles of furniture is carried on as a business is required under this Act, and yearly licences to manufacture or store rag flock are necessary. In addition records of consignments of filling materials for use in the trade are required to be kept for inspection.

These measures are to assist in ensuring that only clean filling materials are used in the business, and to prevent undesirable practices which were alleged to have taken place formerly.

Nine premises are registered under the Act, and three of these were granted licences to store rag flock during the year.

CLEAN AIR

There were thirty complaints regarding the emission of smoke. No legal proceedings were instituted and all were investigated and recommendations made.

The pollution of the atmosphere with the by-products of combustion still remains a serious problem. Because we were born into this problem and have grown up with it, it is only at certain times of the year that we tend to notice it, but it does not exist all the time. The problem is divided into two parts, namely the visible and the invisible pollution. The answer to the problem of invisible pollution is not yet known, although research into this problem is proceeding constantly. We do, however, know the answer to visible smoke. Because of the nature of the town, the vast majority of the smoke in Southport must come from domestic chimneys. This is caused by the obsolete and wasteful practice of burning raw, bituminous coal in open fireplaces, where the temperature of the fire-grate is not sufficient to consume the products of combustion. Those who are devoted to the undoubted cheerfulness of the open fire may have their choice without polluting the atmosphere with filthy smoke. A large variety of open fire-grates designed to burn solid smokeless fuel sare now available at quite reasonable prices. Some of these will only burn certain types of smokeless fuel; which, in the past, have tended to be in short supply at certain times of the year. However, the type of open fire which gathers its primary air supply from under the floor of the house will burn any type of fuel, including hard coke which has never been in short supply.

Generally speaking, all open fires are inefficient in that approximately 40% of the heat generated passes up the chimney. A more efficient appliance is the closed/openable type of room heater, which will burn all the smokeless fuels including those in plentiful supply. Only those who have replaced an open fire with such an appliance will appreciate the resulting reduction of draught in the room and the economy in fuel.

Quite apart from the solid smokeless fuels, electricity, gas and oil (in alphabetical order) are very attractive, offering not only smokeless combustion but cleanliness and considerable saving in work.

It is the hope of this local Authority that many more householders will change over to smokeless combustion, and the Chief Public Health Inspector would be glad to offer advice to any resident who is contemplating installing a new space-heating appliance.

HOUSING

General—The number of inhabited houses increased to 27,373.

The following table shows the number of houses built during the period 1956 to 1965, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Number of houses built	253	305	122	214	115	102	255	252	298	549

Rent Act—There were no applications for Certificates of Disrepair.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 11. In the instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted.

Demolition and Closing Orders—The task of dealing with the houses in the Borough which appeared to be unfit for human habitation continued and during 1965 32 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 34 houses.

The Local Authority are in favour of as many as possible of unfit houses being saved, and it is hoped that the Improvement Grants will encourage owners of old houses to bring them up to a reasonable standard and save them from Demolition and Closing Orders.

OFFICES, SHOPS AND RAILWAY PREMISES

Work under this new legislation received a set-back in July, when the Public Health Inspector appointed for this purpose resigned. Since then, specific complaints and reports of accidents have been dealt with, but very few routine inspections have been carried out.

During the year, the Department purchased a simple light meter and the Public Health Inspectors have been taking readings of light intensity in offices, with disappointing results. The minimum standard of lighting for offices recommended by the Illuminating Engineering Society is 30/45 Lumens sq. ft. In most offices visited the readings have been between 6 and 10 Lumens sq. ft. In no case did the lighting reach the recommended minimum standard. No action has been taken in this connection as the standard is only a recommended one, but it is probable that statutory regulations which will lay down minimum lighting standards will be made in the future.

Registrations and General Inspections during year 1965

Class of Premises	Number of Premises Registered during the Year	Total Number of Registered Premises at End of year	Number of Registered Premises Receiving a General Inspection during the year
Offices	3	252	96
Retail Shops	10	697	424
Wholesale Shops and Warehouses	1	40	37
Catering Establishments open to the public, Canteens	2	103	58
Fuel Storage Depots	1	7	3
Totals	17	1099	618

Number of Visits of all kinds by Inspectors to Registered Premises—1,337.

Analysis of Persons employed in Registered premises by workplace.

Class of workplace	Number of persons employed
Offices	1,633
Retail Shops	3,881
Wholesale departments and Warehouses	311
Catering establishments open to the public }	1,319
Canteens ... ... }	
Fuel storage depots	28
Totals ...	7,172
Males ...	2,675
Females...	4,497

On the whole, the new Act was well received by occupiers of offices and shops, and no serious difficulties were encountered.

Contraventions—During the year 618 general inspections were made and contraventions found numbered 1,013, resulting in the service of informal intimations. In 335 cases the requirements had been met by the end of the year.

The most frequent contravention was the absence of a thermometer which comprised 182 cases or 18% of the premises visited; the absence of a main electric light in external water closet compartments was also noted on many occasions.

Accidents reported during the year 1965

Class of Workplace	No. of Accidents Reported	No. Requiring Investigation	Action Recommended			
			Prosecution	Formal Warning	Informal Advice	No Action Required
Offices	1	—	—	—	—	1
Retail Shops ...	9	2	—	1	1	7
Catering Establishments Canteens	6	2	—	—	2	4
Wholesale Shops, Warehouses and Fuel Storage Depots	—	—	—	—	—	—
TOTALS	16	4	—	1	3	12

Animal Boarding Establishments—The purpose of the Act, is to control such establishments by licence, which must be renewed annually. Matters covered include: accommodation, overcrowding, exercising facilities, temperature, lighting, ventilation, cleanliness, food, drink, bedding, control of infection, fire precautions and the keeping of a register. During 1965, 3 licences were granted.

Riding Establishments

On the 1st April the new Riding Establishments Act, 1964, came into operation, replacing the previous Act of 1939. The new Act introduces a system for licensing riding establishments and makes it an offence to keep such an establishment without a licence. The Act is not a public health measure. It is designed to prevent suffering to horses. The premises and the horses therein are inspected regularly by a veterinary surgeon.

By the end of the year three such licences had been issued.

Houses in Multiple Occupation—The Housing Act, 1961, and the Housing (Management of Houses in Multiple Occupation) Regulations, 1962, gave powers to local authorities to improve conditions in houses of this type, as follows:—

to prevent overcrowding;

to secure adequate facilities for the number of persons living in such a house;

and

to secure a proper standard of management.

Informal action to improve conditions in this type of house continued during the year.

Noise Abatement—During the year 60 complaints regarding alleged nuisance from noise were received. Many of these concerned matters which could not be dealt with under the Noise Abatement Act. The remainder were dealt with by informal action.

Noise is a difficult subject with which to deal. In deciding whether or not a particular noise constitutes a statutory nuisance which can be dealt with under the Public Health Act, a number of factors have to be taken into account. The volume of the noise is only one of these factors and, in practice, would seem not to be the most important.

The Department purchased a noise-intensity meter to help with the subject, and received some surprises regarding the relative intensity of various noises. For example, the readings taken in one of the Departments offices, with no type-writers in operation, were quite considerably higher than any recorded while investigating complaints. The general background noise of traffic was also found to be louder than any noise complained of. Inspectors are frequently asked by complainants to return late at night "when the noise has stopped", in order to judge the nuisance from a noise. From this it would appear that, from the point of view of nuisance, the nature of a noise may be of more importance than its intensity, but one views with apprehension the prospect of being compelled to admit to a Magistrates Court that one had to wait until the traffic had ceased before being able to hear properly the noise complained of.

SECTION VI

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Acts—Records, 1961—1965

Year	Number of samples taken			Analytical Results of Samples						Ratio (%) of samples adulterated	Number of Prosecutions
				Number genuine			Number adulterated*				
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
1961	8	328	336	6	298	304	2	30	32	9·52	—
1962	2	277	279	2	253	255	0	24	24	8·60	—
1963	0	177	177	0	164	164	0	13	13	7·34	—
1964	0	261	261	0	221	221	0	40	40	15·32	—
1965	9	271	280	8	226	234	1	45	46	16·4	—

*Certified by the Public Analyst as being adulterated or otherwise giving rise to irregularity.

Number of samples taken for Bacteriological Examination—Year 1965

Nature of Samples and Specimens	Number of Samples and Specimens taken for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
Ice Cream	—	11	30	—	41
Milk	116	118	55	63	352
Other Foods ...	—	5	5	—	10
Town's Water ...	1	1	1	2	5
Totals	117	135	91	65	408

DISTRIBUTION OF MILK

There are 190 licensed distributors of milk in the Borough, but as dealers in milk are only required to be licensed by an appropriate Authority in one district, the number of persons selling milk in Southport exceeds this number.

Holders of licences to sell designated milk now hold such a licence for five years, but regular inspections are made of the premises, and samples of milk for chemical, bacteriological and biological examination are frequently submitted for the prescribed tests.

Samples of Milk taken during the Year 1965

For Bacteriological Examination

Class of Milk	Number of Samples Tested	Appropriate Tests	Number of Samples		
			Passed	Failed	Void
Pasteurised	223	Phosphatase ... ... Methylene Blue ...	221 218	1 2	1 3
Sterilised	51	Turbidity	51	—	—
Untreated	62	Methylene Blue... ...	47	11	4
		Totals ...	537	14	8

For Biological Examination

Designation	No. of Samples	Tests Applied	No. of Samples	
			Positive	Negative
Untreated	78	Ring Test for Br. Abortus	5	13
		Guinea Pig Inoculation for Br. Abortus	4	52
		Guinea Pig Test for R. Burneti	4	0
		Totals	13	65

The Methylene Blue test is an indication of the keeping quality of the milk which is greatly influenced by the manner in which it is handled during production at the farm and subsequently.

Where unsatisfactory samples were obtained, the premises were thoroughly examined and the equipment tested with a view to finding the source of the failure. In every case where such milk samples were obtained from producers outside the Borough, the information was submitted to the appropriate Authority.

Of the 176 samples of milk submitted for chemical analysis, 24 were reported as not complying with the prescribed standard laid down in the Sale of Milk Regulations, 1939. These results show that 13·6% of the milk sampled failed to comply with the standard, and indicates that vigilance is still required in respect of the production and sale of this very valuable food, to protect the consumers interests. In addition very great care is necessary to ensure that it is 'safe' to drink, in spite of the fact that all liquid milk in England now is from Tuberculin Tested herds.

FOOD INSPECTION

Carcases Inspected and Condemned during year 1965

PARTICULARS	Cattle (exclg.) Cows	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed and inspected... ...	4,668	69	22	6,950	12,210
RESULTS					
All diseases except tuberculosis and cysticerci:					
Number of whole carcases condemned ...	3	3	8	283	70
Number of carcases of which some part or organ was condemned	1,569	12	—	321	902
Tuberculosis only:					
Number of whole carcases condemned ...	—	—	—	—	—
Number of carcases of which some part or organ was condemned	—	—	—	—	18
Cysticercus Bovis	—	—	—	—	—

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1965

	Cwts.	Qrs.	Lbs.
Beef, Veal, Mutton, Pork	549	2	27
Fish	6	2	2
Poultry, Game and Rabbits	1	0	20
Tinned Goods	28	1	2
Fruit	0	3	0
Miscellaneous	4	2	4
Total	590	3	27

Total ... 29 tons, 10 cwt. 3 qrs. 27 lb.

Whenever possible, meat was sent for salvage and conversion into useful substances. The remaining diseased or unsound food was destroyed.

The whole of the food listed was voluntarily surrendered, and no legal action was necessary to safeguard public health.

PUBLIC ABATTOIR

Though built more than 80 years ago, the abattoir continues to serve the needs of the Borough, and those of other districts on occasions. As with many old buildings of this kind the upkeep cost is high.

In 1965, the total number of animals slaughtered was 23,919 against 27,091 in 1964.

FOOD HYGIENE

Education of food handlers has been continued at both Elementary and Advanced levels, and the following table clearly indicates that the courses are both well supported and useful.

Attendances at Food Hygiene Classes

	Trade	Number Attended 1965		Totals to Date
		Elementary Course	Advanced Course	
1	Bakers and Confectioners	17	2	175
2	Butchers and Meat Producers	1	2	65
3	Catering I	12	3	431
4	Catering II	56	1	245
5	Fish Fryers and Fishmongers	—	—	26
6	Fruiters and Greeengrocers	—	—	5
7	Food and Fruit Preserving	13	3	490
8	Grocers	6	4	176
9	Ice Cream and Dairymen	1	2	40
10	Nurseries	8	1	115
11	Others	2	—	85
	TOTALS	116	18	1853

Notes: Catering I — Guest houses, cafes and hotels.

Catering II — School Meals Service, canteens and hospitals.

Though the taking of examinations is voluntary, of the 1,229 students (Elementary Course) who did so, 865 were successful.

Further successes were obtained in the Certificate Examination in Food Handling conducted by the Royal Institute of Public Health & Hygiene, when 5 candidates were successful. Eighty-one candidates have taken this examination and of this number, 79 have been successful.

Premises—During the year the occupiers of food premises carried out routine maintenance and cleansing work. The existing standard is satisfactory and it is gratifying to report that food traders make every effort to improve their accommodation and equipment. In the food industry equipment is constantly wearing out and in need of renewal and caterers continue to co-operate in these matters.

Vermin Infestation—Rat and mice infestation continues to be minimal. It is difficult to eradicate these pests permanently as re-infestation sometimes occurs. An increasing number of food traders take out contracts with firms specialising in the destruction of pests, and their efforts combined with those of the Department, ensure relative freedom from infestation.

Complaints—The majority of complaints received regarding the sale of unsound food were found to be due to bad stock rotation.

Grocers and confectioners should be particularly careful to ensure an efficient rotation of their stock.

With canned goods this ensures that the goods are sold rapidly and with less likelihood of the contents becoming unsound, resulting in blown tins.

Refrigerated cabinets should be capable of maintaining a temperature of O°F. JUST BELOW THE LOAD LINE. Above this load line the temperature of the shop prevails. It is essential, therefore, to ensure that frozen foods are never stacked above the permitted level, and also the stock should be carefully rotated to ensure that the earliest deliveries are sold first.

It should be emphasised that quick frozen foods which have been subjected to a temperature rise should never be re-frozen and offered for sale. Insurance companies will give cover against this loss at a reasonable premium.

Made up meat products such as pies should be kept at a temperature of 45°F.—50°F. They should never be placed in an ice cream cabinet or a frozen food cabinet. Strict stock rotation is imperative with this class of goods because in warm, humid weather mould formation quickly takes place.

Summary of Food Hygiene Inspections for year 1965

Inspections		Number
Hotels, Restaurants and Kitchens		1,486
Bakehouses		188
Butchers' Shops	Retail Food Shops	2086
Confectioners' and Grocers' Shops ...		
Fried Fish Shops		
Fishmongers', Greengrocers' and Poulterers'		
Public Houses, etc.		326
Miscellaneous		260
Total		4,346

THE SHRIMPING INDUSTRY

There has been no great change in this section of the Department's duties in relation to the supervision of food supplies, and the industry follows closely to its traditional methods.

The considerable improvements effected on the coming into force of the Food Hygiene Regulations have been maintained throughout the year.

The shrimpers carry on their business very much in family units or groups, which may have some bearing on their objection to the establishment of a central or communal 'peeling' factory.

No change has been made in the Government's attitude to the peeling of shrimps on domestic premises which are registered with the local authority.

Due to the variation in the time when this process is being carried on visits to such premises are not easy to arrange, but the people engaged in the work have benefited from the lectures and the films shown to them by members of the staff.

Twenty-eight wholesale premises are now registered under the Food & Drugs Act, 1955, in addition to the houses at which shrimp peeling is permitted.

ICE CREAM

The number of premises used in connection with the manufacture, sale and storage of ice cream is set out below:—

Particulars	Number
For the purpose of manufacture and sale	20
For the purpose of sale	244
For the purpose of storage	1
Total	265

The bacteriological quality of ice cream on sale in the Borough is indicated by the results recorded below.

Year	Percentage of Samples found to be unsatisfactory
1961	20·00
1962	21·60
1963	22·50
1964	50·00
1965	37·00

The figure of 37% of unsatisfactory samples is not a fair indication of the standard of ice cream on sale in the Borough. In recent years it has been found that the wrapped product manufactured by the large ice-cream firms invariably passes the test. Consequently, in 1965, the number of samples taken of this type was reduced, and more attention was paid to the "soft freeze" variety.

The problems presented by the recent increase in the use of the "Soft Freeze" machine are due mainly to the inadequate cleansing and sterilising of the working parts. The cleansing and sterilising procedure is both time consuming and of a technical nature and the persons operating these machines are very often not properly instructed.

Due to constant sampling and supervision of general cleansing and sterilising practices by Public Health Inspectors, the general standard has improved somewhat, but still leaves a great deal to be desired.

Greater attention is to be paid to this matter in 1966.

In all instances where samples have failed the tests recommended to ensure a high standard, every effort has been made to help the producer to discover any fault in the method of manufacture. Where unsatisfactory samples have been obtained from manufacturers outside the Borough, the appropriate authority has been informed.

41 samples of ice cream were procured and submitted for bacteriological examination.

The Ministry of Health Provisional Grading of Ice Cream is divided into four grades as follows:—

GRADE I the ice cream, after incubation, does not decolourise Methylene Blue in 4 hours.

GRADE II the ice cream, after incubation, decolourises Methylene Blue in 2 hours to 4 hours.

GRADE III the ice cream, after incubation, decolourises Methylene Blue in ½ hour to 2 hours.

GRADE IV the ice cream, after incubation, decolourises Methylene Blue immediately.

Grades I and II are regarded as satisfactory; Grades III and IV as unsatisfactory.

The following table shows the gradings of the samples examined:—

Ice Cream Samples—Results During Year 1965

Year	No. of Samples Taken	Results of Samples Taken					
		Number Satisfactory			Number Unsatisfactory		
		Grade I	Grade II	Total	Grade III	Grade IV	Total
1961 ...	50	27	13	40	8	2	10
1962 ...	51	36	5	41	5	5	10
1963 ...	16	9	5	14	—	2	2
1964 ...	30	10	5	15	7	8	15
1965 ...	41	20	6	26	9	6	15

COUNTY BOROUGH OF SOUTHPORT

ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1965

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

EDUCATION COMMITTEE AS AT THE 31st December, 1965

The Mayor, Alderman H. H. Barber, J.P.

Councillor Mrs. B. Pogson (Chairman)

Councillor T. R. Glover (Vice-Chairman).

Alderman T. Ball, J.P.

Alderman J. Campion

Alderman A. J. Hughes

Councillor C. I. Anderson

Councillor H. Bond

Councillor E. J. Downs

Councillor Mrs. M. Goldberg

Councillor L. Goldwater

Councillor Mrs. J. Leech

Councillor Mrs. E. M. Monk

Councillor F. Stanworth

Councillor F. J . Wilde

Mr. G. F. Dixon

Mr. J. Gavin

Dr. D. G. Pritchard

The Rev. E. Formby

The Rev. D. S. Noel

The Rev. A. Thompson

Representatives on Joint Health and Education Sub-Committee

Councillor Mrs. B. Pogson (Chairman)

Councillor T. R. Glover (Vice-Chairman)

Alderman T. Ball, J.P.

Councillor E. J. Downs, E.R.D., T.D.

Councillor F. J. Wilde

Councillor Mrs. J. Leech (until November)

SCHOOL HEALTH SERVICE STAFF,

as at 31st December, 1965

Medical Staff

Principal School Medical Officer	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H. F.R.S.H.
Deputy Principal School Medical Officer	ANNA I. DAVISON, M.B. Ch.B., C.P.H.
School Medical Officer	MARGARET C. FELL, M.B., Ch.B., D.P.H., D.C.H.
School Medical Officer	T. J. DAILEY, M.B., Ch.B., D.P.H.

Visiting Medical Staff—

Eye Clinic	C. S. L. PEIRIS, F.R.C.S.(E), D.O. (Eng.), M.B. (Cey).
Ear, Nose and Throat Clinic	R. V. TRACY-FORSTER, F.R.C.S., M.B. Ch.B., D.L.O.
Skin Clinic	A. ROBY JONES, M.D.
Child Guidance Clinic	I. BERMAN, M.B., Ch.B., D.P.M.

Dental Staff—

Principal Dental Officer	W. L. ROTHWELL, L.D.S. (Liv.)
Dental Officer	P. L. HEATHCOTE, L.D.S. (Liv.)
Dental Officer	J. B. LEECH, L.D.S., R.C.S. (Eng.)
Consultant Orthodontist (part-time)	H. POGREL, L.D.S. (Liv.), L.D.S., R.C.S. (Eng.), D.Ortho.R.C.S. (Eng.)
3 Attendants	

Nursing Staff—

Superintendent Nursing Officer	Miss E. MITCHELL, S.R.N., S.C.M., H. V. Cert.
Senior Health Visitor/School Nurse	Miss A. MULLAN, S.R.N., S.C.M., H. V. Cert.
12 School Nurses (Part-time)	
2 Clinic Nurses	

Medical Auxiliaries—

Physiotherapist	Mrs. V. A. MACLEOD, M.C.S.P.
Physiotherapist (Part-time)	Mrs. P. M. LAKE, M.C.S.P.
Speech Therapist	Vacant
Chiropodist (Part-time)	W. H. ROGANS, M.Ch.S.

Child Guidance Staff—

Educational Psychologist	J. N. NUTTALL, B.A.
Psychiatric Social Worker (Part-time)	C. R. CROUCHMAN, B.A., A.A.P.S.W.
Social Worker (Part-time)	Mrs. J. C. HAWKYARD, M.A.O.T.
Remedial Teacher (Part-time)	Mrs. H. J. SMITH

Clerical Staff—

1 Senior Clerk.
1 Secretarial Assistant.
3 Clerks.
1 Shorthand Typist/Clerk.

Principal School Medical Officer's Annual Report

FOR 1965

TO THE CHAIRMAN AND MEMBERS OF THE

EDUCATION COMMITTEE

It is my honour and privilege to present my report on the work of the School Health Service in 1965.

The number of children in attendance at our schools has risen since 1964 and was 10,418 in the year under review.

The routine work in all sections has been satisfactorily carried out, and is described in more detail in the body of the report.

There have been some staffing difficulties owing to illness and people leaving to go to new appointments: the effect has been particularly noticeable in the Child Guidance Section.

Though infectious diseases have not caused much difficulty this year there has been a high incidence of verrucae: these annoying plantar warts can be very painful and resistant to treatment. Efforts have been made to limit the spread by the use of an iodine containing disinfectant, though success has only been partial. It was necessary to increase the number of chiropody sessions to deal with this outbreak.

A special effort has been made by the staff of the dental section in dental education: it has received a good deal of support from the teaching staff and deserves praise. The Principal School Dental Officer's comments are in the report.

It is obvious to those of us who have worked with children for many years that there is much less serious physical disease to be found amongst them than was the case twenty-five years ago. This is very satisfying but there remains an immense and increasing field in preventive medicine: one has to teach children how to safeguard and maintain good health and this can be a more difficult field in which to work than that of curative medicine. There is an increasing amount of evidence that the seeds of mental illness can be laid down at a very tender age, and mental illness is one of our greatest national problems. It seems likely that health education in a wide sense will increasingly become part of the school curriculum. A small experiment in health teaching under the title "Learning to Live" has been started in one of our secondary schools: it is hoped to report in some detail on this next year.

Mr. David Rankine, who was the school ophthalmologist for many years, died during the year. He will be remembered for his kindness to us all and especially to the children. Mr. Peiris was appointed by the Liverpool Regional Hospital Board to the vacancy.

I should like to record my grateful thanks to the members of the Council, to my medical colleagues in the town and to the staff of the department for their support and help during the year.

G. N. M. WISHART,

Principal School Medical Officer.

SCHOOL HEALTH SERVICE

A large part of the duties of the school health staff is aimed at helping each child to make the best of his opportunities at school, and of necessity much work of this kind, such as patient and accurate testing of eyesight and hearing, is unexciting: yet on the early detection of defects of this and other kinds may depend whether the child is able to make a success of his school and later life. The general public as a whole is now much more knowledgeable about such things, and parents are insisting that the Health Service provided by the Local Education Authority should be of a high standard. This is evident by the parents' attendance at medical inspections and by the questions they ask.

The school health service is largely an advisory and preventive medical one. When treatment other than of a minor kind is necessary, this is usually arranged through the Family Doctor or Hospital Services: there are excellent liaison arrangements between these three services. In the case of behavioural and emotional problems, the school doctor, because of his easy access to the child's teacher, may be in a particularly favourable position to help.

The number of children on the register of the Education Authority is listed below. The figures for the previous year are given for comparison.

	Year 1964	Year 1965
Primary School	6,088	6,435
Secondary Schools	3,977	3,983
	10,065	10,418

ROUTINE MEDICAL INSPECTIONS

As usual all schools were visited during the year and parents were notified of the time and place of medical inspections and invited to attend.

Child welfare centre premises and church halls were used when conditions in school were unsuitable.

The method used in previous years was continued, ensuring that children are examined by a school medical officer at least three times during their school lives, viz:—

(a) Every pupil admitted for the first time to a maintained school is inspected as soon as possible after admission.

(b) Every pupil attending a maintained primary school is inspected during the last year of his attendance at that school.

(c) Every pupil attending a maintained secondary school is inspected during the last full year of his attendance at that school.

The number of children in each age group is given below.

PRIMARY SCHOOLS—	
Entrants	856
Leavers	731
SECONDARY SCHOOLS—	
Leavers	747
ADDITIONAL MEDICAL INSPECTIONS (All Schools)	573
TOTAL NO. OF CHILDREN INSPECTED	2907

The Nursery School at Crossens was visited each term.

The percentage of parents attending with their children at examinations is given below.

PRIMARY SCHOOLS—	
Entrants	78.40%
Leavers	53.40%
SECONDARY SCHOOLS—	
Leavers	7.76%
ADDITIONAL MEDICAL INSPECTIONS (All Schools)	48.16%

Defects found at Routine Medical Inspections.

Below are the numbers of children in each age group found to require treatment.

	Entrants	Primary Leavers	Secondary Leavers	Additional Inspections (all schools)	TOTALS
Number of children examined ...	856	731	747	573	2907
Number of children requiring treatment	119	126	81	81	407
Percentage requiring treatment ...	13·9	17·2	10·8	14·1	14·0

A detailed list of all defects is to be found in the tables at the end of this report.

Before the school medical examination every child is inspected annually by the school nurse. Any pupil found to have a defect is later seen by a school medical officer, in addition to the children already listed for medical inspection. This year the number of children examined by the school nurses was 10,573 and of these 269 were referred for further examination, together with 1,122 from last year's medical inspection.

CLINICS

Nurses Treatment Clinics—These clinics are open every week day and arrangements for treatment ensure that every effort is made to reduce waiting time and time lost from school.

During the year, 9,005 attendances were made by children—7,513 at 2 Church Street Clinic; 1,376 at Lincoln House Clinic and 116 at Woodvale Clinic.

Minor Ailments Clinic—This is a weekly clinic at which children and parents are seen by the school medical officers. Parents are advised about their children and if further investigation is required, they are referred to hospital with the knowledge and consent of the child's general medical practitioner. The number of children seen at this clinic during the year was 521, and these children made 1,668 attendances. 75 cases were referred to the Southport Infirmary for further investigation, 21 to the Promenade Hospital, 4 to Alder Hey Children's Hospital, and 1 to Royal Liverpool Children's Hospital.

28 children were referred to the Casualty Department at the Southport Infirmary by the school medical officers and the clinic nurses.

Eye Clinic—During the year, 493 attendances were made at this clinic. 129 new cases were examined and 248 children attended for observation of progress from previous years. 194 children had spectacles prescribed for them and 4 children were referred to the Southport Infirmary for operative treatment.

These numbers are appreciably lower than last year's on account of the death of Mr. Rankine, the School Ophthalmologist. It was some little time before alternative arrangements were made for the resumption of this clinic.

Ear, Nose and Throat Clinic—In 1965, 588 attendances were made at this clinic. 474 new cases were examined and 52 children attended for observation of progress from previous years. 225 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, 4 for mastoidectomy and 128 for other forms of treatment.

Children who may have any loss of hearing are referred to the School for The Partially Hearing, Birkdale, or to the University Department for the Deaf in Manchester, for special examination.

Audiometric sweep testing of 5-year olds was carried out in all primary schools by the school nurses. Children who failed the test were invited to attend the school clinic for re-testing by one of the school medical officers. Some of these children were referred to the Ear, Nose and Throat Specialist. Further audiometric testing was carried out after treatment to make sure that the hearing had improved. 1,326 children were tested in school.

Skin Clinic—During the year, 223 attendances were made. 43 new cases were examined and 39 were seen for observation of progress from previous years.

Chiropody Clinic—This clinic provided an efficient service for the treatment of verrucae, corns and similar afflictions.

183 children made 878 attendances during the year. Of these 153 were discharged cured and 30 were still being treated at the end of the year. Verrucae formed the greater part of the defects treated, and each child attended the Chiropodist approximately 5 times before being discharged.

Artificial Sunlight Clinic—Children were referred from the chest clinic and the paediatric clinic of the Southport Infirmary, the school minor ailments clinic and from routine medical inspections. General medical practitioners also referred children to the department for artificial sunlight.

61 school children were treated at 2 Church Street and made 689 attendances. 24 children were treated at Lincoln House and made 352 attendances.

Orthopaedic and Remedial Exercises Clinic—Children were referred by the school medical officers and from the school children's Consultant Orthopaedic Clinic at the Promenade Hospital.

180 children made 4,498 attendances during the year, at 2 Church Street and 100 children made 1,684 attendances at Lincoln House.

21 cases were referred to the Promenade Hospital for Consultant opinion and advice. The physiotherapist attended this Orthopaedic Clinic, so that good liaison was maintained between the hospital and this department.

Speech Therapy—Treatment for defective speech was given at the North West School of Speech and Drama, and 130 sessions were held during the year.

No. recommended by the school medical officers for treatment in 1965	39
No. of new cases admitted to regular classes in 1965	33
No. of children discharged as cured	36

Sixty-three children attended these classes; the reasons for the defects in speech were:

(a) Slow and abnormal speech development	45
(b) Stammering	8
(c) Lisp	9
(d) Cleft palate	1

During the year 998 attendances were made by children requiring treatment. This service is greatly appreciated by the parents as a speech defect is an obvious one and a great handicap in later life.

CHILD GUIDANCE SERVICE

This service has been unable to function satisfactorily during the year.

The absence, through illness, of Dr. Berman, the Consultant Child Psychiatrist, and several staff changes, have contributed. It is to be hoped that the situation will improve in 1966.

Mr. A. E. N. Fawcett, who has served as Educational Psychologist for four years, has left to take up a research appointment in the field of industrial psychology. Fortunately the Authority have been able to engage Mr. J. W. Nuttall without any considerable gap. Mrs. Crouchman has also been appointed for part-time duties as the Psychiatric Social Worker.

The Liverpool Regional Hospital Board are considering what help can be given from other Child Psychiatrists until Dr. Berman is able to return.

Remedial teaching is a feature of the Child Guidance facilities and 37 children received such teaching during 1965.

Good liaison continues with the police in respect of children in trouble because of their behaviour problems.

Occupational Therapy—Occupational Therapy is available for children who are attending the Child Guidance Clinic. 45 visits were paid to children in their own homes.

HANDICAPPED PUPILS

Physically Handicapped Children—The work in the Children's Convalescent Hospital Special School in Hawkshead Street deserves special mention. Though the majority of the pupils are children from other areas who are resident in the hospital, day scholars from Southport are also taught there. This has been of very great benefit to the town and has meant that children, who otherwise would have had to be educated at residential special schools, have been able to stay at home and that our own medical staff have been able to follow their progress. Some of these children were seriously physically handicapped and required the support and encouragement which their parents were able to give them in the circumstances. Most of them have to be taken to and from the school by taxi. The staff do all in their power to make the school a happy and efficient one.

20 children with the following handicaps were receiving education in the school at the end of the year:—

Sex	*Age*	*Handicap*
Boy	5 years	Spastic Paralysis
,,	6 ,,	Rudimentary Arms
,,	6 ,,	Muscular Dystrophy
,,	6 ,,	Spastic Paraplegia
,,	7 ,,	Cerebral Tumour
,,	7 ,,	Congenital Heart
,,	8 ,,	Muscular Dystrophy
,,	8 ,,	Bronchitis
,,	8 ,,	Congenital Deformity of Urethra
,,	9 ,,	Spastic Diplegia
,,	10 ,,	Spastic Paralysis
,,	13 ,,	Sclero-derma
Girl	5 ,,	Spastic Paralysis
,,	6 ,,	Encephalitis
,,	7 ,,	Mid-Thoracic Scoliosis
,,	8 ,,	Arthro-Gryphosis Multiplex Congenita
,,	9 ,,	Asthma
,,	9 ,,	Spina Bifida
,,	10 ,,	Bi-lateral Congenital Talipes
Boy	11 ,,	Partially Sighted

Two of the above children are weekly boarders, the remainder being day pupils.

There are four children in hospital as in-patients for various other conditions.

Deaf and Partially Hearing Children—One deaf child and one partially hearing child are in residential schools. Eight children attend a special school for the partially hearing as day pupils.

Educationally Sub Normal Children—Nine children were receiving special education in residential schools at the end of the year. Places in such schools are not easy to find and costs are increasing.

The Authority has requested that the project for the building of a day special school should be given an early place in the building programme. When this school is completed, very good facilities will be available for children suffering from this type of handicap, and it may then be possible to reduce the number of children who at present have to be educated at residential special schools.

The six 'Opportunity' Classes continued to do very good work during the year. In the present circumstances these classes admit children who are educationally subnormal as well as those retarded in their studies from a variety of causes, e.g., due to absence from school because of illness.

Maladjusted Children—There is one child in a residential special school for maladjusted pupils.

Children Unsuitable for Education in Schools—During the year, four children were notified under Section 57 of the Education Act, 1944, as amended by the Mental Health Act, 1959.

TUBERCULOSIS

There is good liaison between the School Health Service and the Hospital Service, so that there is an adequate exchange of information regarding contacts of this disease.

Notifications—During 1965, No school children were found to be suffering from pulmonary tuberculosis.

B.C.G. Vaccination—This was the eleventh year that B.C.G. vaccination against tuberculosis has been offered to those of thirteen years of age and over in all schools, maintained and independent, in the area.

When children are eligible for B.C.G. vaccination, an explanatory note with a consent form is sent to parents.

The percentage of parents who failed to reply to this letter was 3.0% as against 2.6% in the previous year. These parents were visited by members of the health visiting staff, so that no effort was spared to bring to their notice the importance of vaccination against tuberculosis.

The following table shows statistics for the last five years.

Year	Acceptance Rate %	No. of children tested	Positive Skin Test %	Negative Skin Test %	Results not read due to absence %	No. Vaccinated
1961	77.7	938	11.9	84.7	3.4	787
1962	81.1	1,110	17.4	79.8	2.8	872
1963	76.8	872	12.5	82.6	4.9	716
1964	85.5	887	12.9	83.2	3.9	728
1965	83.3	882	14.0	82.3	3.7	710

A more detailed list is given in the statistical table at the end of the report.

Tuberculin Skin Testing of School Entrants—This is the tenth year that new entrants to school have been offered skin tests to find out if they have at any time been exposed to tuberculous infection.

The percentages of positive skin tests, in five year old children whose parents wished the test to be carried out, (excluding those due to previous B.C.G. vaccination) are shown below for the last five years.

Year	No. tested	No. positive	% positive
1961	640	9	1.4
1962	717	8	1.1
1963	831	8	1.0
1964	832	3	0.4
1965	819	9	1.1

The children with positive tests, their parents and the remainder of the family, were offered a chest X-ray. This year, no new cases of active pulmonary tuberculosis were revealed by the X-rays taken.

INFECTIOUS DISEASES

Notifications were as follows, with figures for 1964 for comparison:—

	1964	1965
Measles	446	243
Rubella	68	73
Scarlet Fever	12	41
Chicken Pox	604	113
Diphtheria	NIL	NIL
Whooping Cough	14	17
Tuberculosis	1	NIL

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of school children for fitness to take part in public entertainment	8
Examination of school children for part-time employment	22
No. of children seen at 'follow-up' visits to schools by School Nurses ...	228
Miscellaneous home visits by School Nurses	742

HEALTH EDUCATION IN SCHOOL

Regular mothercraft classes were held at all the secondary modern schools at which girls attend, viz., Meols Cop, Christ the King, Stanley and Birkdale.

The syllabus is comprehensive and includes hygiene, diet and nutrition of children, clothing and footwear, simple first-aid and home nursing, as well as practical classes in cot-making, baby bathing, dressing and feeding. The classes are very popular with the girls, and it is hoped that some of the knowledge gained will be useful to them in later life.

SCHOOL MEALS

During the year, 1,273,889 meals were given to Southport school children. About 7% of these meals were supplied free. On an average, 71.3% of the school children have dinner in school.

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT 1965

The authorised professional establishment of one Principal School Dental Officer and two School Dental Officers has been maintained throughout the year, and it is good to record that absence from duty of the dental officers through sickness amounted to only twelve half-day sessions.

All the schools have been visited during the year for dental inspection, and, in addition, five of the schools have been re-visited, thus reducing the period between inspection and re-inspection to nine months in some cases.

At the commencement of the year a revised scheme of Documentation for the Local Authority Dental Services was introduced with the object of integrating the statistics of this service with those provided by the Dental Estimates Board. Thus a standard set of statistics is now produced by each authority throughout the country.

The department was selected to take part in a National Survey of the dental condition of pupils aged fifteen—this took place during the spring term, and involved a detailed examination of the mouth of 10% of the pupils of that age. The aim of the survey was to find out the number of children known to be dentally fit about the time they are likely to leave school, and thus to what extent their dental needs are being met.

Towards the end of the year a survey of diet and dental caries in young children was completed on behalf of the Society of Medical Officers of Health and in collaboration with the Preventive Department of the School of Dental Surgery, University of Liverpool. We were asked to take a 1/50 sample, from the birth register, of all the children aged one and two years, and arrange for the health visitors to fill in a questionnaire relating to those children. It is known, for instance, that vitamin syrup administered undiluted, or the habit of leaving a feeding bottle containing sweetened liquids in a child's mouth when it goes to sleep, causes gross destruction of teeth in certain cases. This survey was an attempt to correlate these habits and gross dental caries and to investigate regional differences in the feeding habits of young children which may cause gross destruction of the teeth at an early age.

A scheme was introduced so that at the beginning of the school term each new entrant to school receives an envelope to take home. This contains pamphlets on dental health, along with a letter to the parent, pointing out the part they can play in encouraging their child to carry out simple rules to promote dental health and asking for their support. This, it is hoped, is one way to bring home to the parent this important matter.

It was also arranged for suitable dental health pamphlets to be included with the birthday cards (published by the Central Council for Health Education) that are sent to children attending welfare centres, commencing with the child's first birthday.

Posters have been taken to schools at the time of school inspections, and a large and varied supply of literature and pamphlets have been obtained to be always available in the waiting room. The film "Where There's a Will" has been shown at six secondary schools, and arrangements are in hand for more films to be shown during 1966. After the film a talk was given to emphasise the points mentioned, and any questions that arose were answered.

A large number of children receive regular treatment through the general dental service, leaving among the rest a proportion of unco-operatives or "unreceptives". They have the choice of two free services and can play one off against the other—failing to return consent forms, refusing treatment, or agreeing to accept treatment and failing to keep appointments; they then turn up later as emergencies. After inspection in school when it can be seen that no treatment has been carried out over a period of time, a direct approach is being made, by letter in some cases, urging the parents to make arrangements for treatment.

In conclusion attention should be drawn to fluoridation, of which it can be said quite clearly that no public health measure has had such a wealth of acceptable evidence in its favour and such a complete absence of valid evidence against it. The benefit to dental health of those reared on water containing one part per million fluoride is irrefutable and hope is expressed that, in the near future, such a concentration will be added to the water supplied to Southport.

CLINICS AS AT THE 31st DECEMBER, 1965

DAY		2 CHURCH STREET	46 HOGHTON STREET	LINCOLN HOUSE
MONDAY	a.m.	*Ear, Nose and Throat Clinic (fortnightly) Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic
MONDAY	p.m.	Doctors' Minor Ailment Clinic Nurses' Dressings Clinic Dental Clinic	—	*Artificial Sunlight Clinic *Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
TUESDAY	a.m.	*Eye Clinic Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
TUESDAY	p.m.	Nurses' Dressings Clinic Dental Clinic	—	Nurses' Dressings Clinic Dental Clinic
WEDNESDAY	a.m.	Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic
WEDNESDAY	p.m.	*Orthopaedic (monthly) Nurses' Dressings Clinic *Orthodontic Clinic (fortnightly) Dental Clinic	—	*Artificial Sunlight Clinic *Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
THURSDAY	a.m.	*Chiropody Clinic Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
THURSDAY	p.m.	*Skin Clinic (monthly) Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
FRIDAY	a.m.	Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic
FRIDAY	p.m.	Immunisation Clinic Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic (fortnightly)	*Artificial Sunlight Clinic *Remedial Exercises Clinic Nurses' Dressings Clinic Dental Clinic
SATURDAY	a.m.	*Orthodontic Clinic	—	—

* By Appointment Only.

The Ainsdale Health Visitor/School Nurse continues to use a temporary building at Woodvale as a centre and arranges with the local schools to see children there instead of sending them on the long journey into town.

YEAR 1965

Statistics of Medical Inspection of Pupils attending Maintained Primary, and Secondary Schools, The Nursery School and the Hospital Special School.

PART I

PERIODIC MEDICAL INSPECTIONS

Physical Condition of Pupils Inspected

Age Groups Inspected (by years of birth) (1)	No. of pupils Inspected (2)	SATISFACTORY (3)	UNSATISFACTORY (4)
1961 and later	131	131	—
1960	391	390	1
1959	409	408	1
1958	82	81	1
1957	82	82	—
1956	61	61	—
1955	95	95	—
1954	513	513	—
1953	261	261	—
1952	53	53	—
1951	543	542	1
1950 and earlier	286	286	—
TOTAL	2907	2903	4

Pupils found to Require Treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin)

Age groups Inspected (by year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1961 and later	—	14	14
1960	2	49	51
1959	2	59	59
1958	—	13	13
1957	2	16	17
1956	2	9	11
1955	2	15	16
1954	9	58	67
1953	6	37	42
1952	1	4	5
1951	18	49	64
1950 and earlier	12	17	28
TOTAL	56	340	387

OTHER INSPECTIONS

Number of Special Inspections	956
Number of re-inspections	2240
TOTAL	3196

PART I (cont.)
IINFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons.....9544
Total number of individual pupils found to be infested..... 68
Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).....None
Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).....None

PART II

DEFECTS FOUND BY MEDICAL INSPECTION
A.—AT PERIODIC INSPECTIONS

Defect or Disease		Entrants	Senior Leavers	Others	TOTAL
Skin	T	11	10	23	44
	O	28	7	14	49
Eyes—Vision	T	4	29	23	56
	O	4	6	11	21
Squint	T	1	1	—	2
	O	5	—	—	5
Other	T	1	1	2	4
	O	1	—	1	2
Ears—Hearing	T	22	4	12	38
	O	7	3	1	11
Otitis Media	T	5	1	4	10
	O	10	1	4	15
Other	T	3	3	3	9
	O	10	2	2	14
Nose and Throat	T	25	8	17	50
	O	56	7	25	88
Speech	T	7	2	9	18
	O	20	—	8	28
Lymphatic Glands	T	5	1	1	7
	O	10	—	6	16
Heart	T	5	2	9	16
	O	20	3	12	35
Lungs	T	6	2	1	9
	O	3	5	8	16
Developmental—Hernia	T	2	—	2	4
	O	3	1	—	4
Other	T	2	—	10	12
	O	49	2	32	83
Orthopaedic—Posture	T	4	6	27	37
	O	5	6	9	20
Feet	T	8	2	29	39
	O	20	3	48	71
Other	T	11	2	12	25
	O	35	6	17	58
Nervous System—Epilepsy	T	2	—	3	5
	O	—	—	—	—
Other	T	2	—	2	4
	O	3	—	2	5
Psychological—Development	T	1	—	1	2
	O	6	—	5	11
Stability	T	1	—	4	5
	O	7	—	8	15
Abdomen	T	3	—	4	7
	O	1	2	5	8
Other	T	13	15	28	56
	O	18	14	28	60

Key: T—For Treatment; O—For Observation.

PART II (cont.)

B.—AT SPECIAL INSPECTIONS

Defects or Diseases	Special Inspections	
	Pupils requiring Treatment	Pupils requiring Observation
Skin	145	7
Eyes—Vision	12	4
Squint	6	2
Other	30	3
Ears—Hearing	57	40
Otitis Media	5	—
Other	28	2
Nose and Throat	73	21
Speech	24	7
Lymphatic Glands	3	6
Heart	2	5
Lungs	4	—
Developmental—		
Hernia	2	—
Other	15	3
Orthopaedic—		
Posture	9	7
Feet	22	8
Other	70	18
Nervous System—		
Epilepsy	1	1
Other	1	2
Psychological—		
Development	10	2
Stability	8	4
Abdomen	29	2
Other	98	24
Total	654	168

PART III

TREATMENT OF PUPILS

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	56
Errors of refraction (including squint)	374
Total	430
Number of pupils for whom spectacles were prescribed	194

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
for diseases of the ear	4
for adenoids and chronic tonsillitis	225
for other nose and throat conditions	128
Received other forms of treatment	852
Total	1209
Number of pupils in schools who are known to have been provided with hearing aids—	
in 1965	3
in previous years	12

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments—	
Specialist Clinics	21
By Local Authority Medical Staff	172
Pupils treated at school for postural defects	—
Total	193

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanliness, for which see Part I)

	Number of cases known to have been treated
Ringworm— Scalp	—
Body	1
Scabies	5
Impetigo	5
Other skin diseases	417
Total	428

CHILD GUIDANCE SERVICE

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinic:—	
Maintained school children	47
Pre-school children	4
Private school children	1
Lancashire County school children	7
Total	59

(For further details see Table VI)

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	63

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments	521
Pupils who received convalescent treatment under School Health Service arrangements	—
Pupils who received B.C.G. vaccination	710
Artificial Sunlight	85
Remedial Exercises	280
No. of 5 year old entrants who have had Skin Tests	819
Total	2415

PART IV

SCHOOL DENTAL SERVICE

	Health Department	Lincoln House	Totals
1. INSPECTIONS:			
(a) Number of pupils having a first inspection during the year	6970	3022	9992
(b) Number of those pupils found to require treatment	3195	2010	5205
(c) Number of pupils re-inspected during the year ...	2159	1181	3340
(d) Number of those pupils found to require treatment	1048	553	1601
2. Number of individual pupils treated (i.e. first visits for treatment)	1940	859	2799
3. Number of attendances made by pupils for treatment ...	5160	3485	8645
4. Half days devoted to:—			
(a) Visits to schools (Inspections and Health Education)...	77	26	103
(b) Treatment (including 61 Orthodontic Sessions)...	775	397	1172
5. Fillings—(a) Permanent Teeth	2984	879	3863
(b) Temporary Teeth	1479	1466	2945
Total	4463	2345	6808
6. Number of Teeth filled—(a) Permanent Teeth	2557	796	3353
(b) Temporary Teeth	1312	1359	2671
Total	3869	2155	6024
7. Extractions—(a) Permanent Teeth	388	236	624
(b) Temporary Teeth	1468	492	1960
Total	1856	728	2584
8. General Anaesthetic administered by Dental Officers ...	353	179	532
9. ORTHODONTICS:			
(a) New Cases commenced	61	23	84
(b) Cases completed	43	10	53
(c) Cases discontinued	17	2	19
(d) Total attendances	682	161	843
10. PROSTHETICS—Number of dentures supplied ...	7	—	7
11. Other Operations (including X-rays, Prophylaxis, Teeth otherwise conserved, Root treatment, Inlays, Crowns, Dressings, etc.)	735	930	1665

TABLE V

AVERAGE HEIGHTS AND WEIGHTS

The table below shows the heights and weights of children in 1965.

Age last Birthday	1965	
	Height ft. ins.	Weight st. lbs.
Age 5 years		
Boys	3 8	3 2¼
Girls	3 7	3 1½
Age 10 years		
Boys	4 7½	5 7½
Girls	4 7	5 6¾
Age 14 years		
Boys	5 3	8 0
Girls	5 2	8 5
Age 15 years		
Boys	5 6½	9 0¼
Girls	5 4	8 11¼

TABLE VI

CHILD GUIDANCE SERVICE

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		TOTAL
	School Children		Pre-School Children	School Children	Pre-School Children	
	Maintained Schools	Private Schools				
Number of new children referred	32	1	3	2	—	38
Number of children referred by:—						
Family Doctors	13	—	—	—	—	13
School Medical Officers...	10	1	1	—	—	12
Juvenile Court & Probation Officers	—	—	—	—	—	—
Consultant Medical (including Hospital Staff)	2	—	1	2	—	5
Children's Officer ...	—	—	—	—	—	—
Chief Education Officer...	—	—	—	—	—	—
Miscellaneous	7	—	1	—	—	8
TOTAL	32	1	3	2	—	38
Number of individual children seen during year ...	47	1	4	7	—	59
Number of attendances made by:—						
Children	217	2	5	19	—	243
Parents	85	2	5	16	—	108
TOTAL	302	4	10	35	—	351
Number of children on waiting list at commencement of year	14	—	—	7	—	21
Number of children on waiting list at end of year ...	20	1	2	4	—	27

Number of sessions conducted by Consultant Child Psychiatrist 60

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		
	School Children		Pre-School Children	School Children	Pre-School Children	
	Maintained Schools	Private Schools				
Number of home visits by Psychiatric Social Worker	17	—	1	2	—	20

TABLE VII

HANDICAPPED PUPILS

Category	Number Ascertained				Type of Education Provided			Requiring Special School Accommodation But Unplaced At The End Of The Year			Totals
	No. on the register at the 1st Jan., 1965	No. added during the year, 1965	No. with-drawn in 1965	No. on the register at 31st Dec., 1965	Ordinary School	Special Schools: Day Class or School	Special Schools: Residential School	Day Class or School	Special School	Refusal by Parents	
Blind	—	—	—	—	—	—	—	—	—	—	—
Partially Sighted ...	8	1	2	7	5	1	1	—	—	—	7
Deaf	—	1	—	1	—	1	—	—	—	—	1
Partially Hearing ...	13	2	—	15	6	8	1	—	—	—	15
Delicate	2	—	1	1	1	—	—	—	—	—	1
Diabetic	9	4	—	13	11	—	2	—	—	—	13
Educationally Sub-normal	71	12	16	67	—	14	9	41†	3	—	67
Epileptic	19	6	2	23	23	—	—	—	—	—	23
Maladjusted	3	2	1	4	1	—	1	—	2	—	4
Physically Handicapped	116	29	12	133	112	17	4	—	—	—	133
TOTALS ...	241	57	34	264	159	41	18	41	5	—	264

† This figure includes children in 'Opportunity' Classes awaiting Day Special School accommodation and also children recommended for 'Opportunity' Classes who have managed to cope in a 'C' stream in a senior school.

TABLE VIII

B.C.G. VACCINATION OF SCHOOL CHILDREN

	KIND OF SCHOOL			TOTALS	
	Local Authority Schools	Private Schools	St. Thomas More Approved School	No.	%
Number of consent forms issued to parents	958	172	48	1178	—
Number of parental consents received	790	143	48	981	83·3
Number of definite refusals ...	149	13	—	162	13·7
Number of parents who did not reply	19	16	—	35	3·0
TOTAL	958	172	48	1178	100
Number of Children tested ...	720	131	31	882	89·9
Number of children with consent forms but not tested ...	70	12	17	99	10·1
TOTAL	790	143	48	981	100
Number of children tested and found to be:—					
Positive reactors	88	19	16	123	14·0
Negative reactors	602	111	13	726	82·3
Number not read	30	1	2	33	3·7
TOTAL	720	131	31	882	100
Number of negative reactors vaccinated	591	107	12	710	—

TABLE IX

TUBERCULIN SKIN TESTING OF SCHOOL ENTRANTS

Number of children already tested	32
Number of 'no replies'	161
Number of definite refusals	64
Number of consents received	942
Total Number of eligible children	1199
Number of children tested	819
Number of children absent from the test	123
Total Number of children for whom consents were received	942
Number of children tested and found to be:—	
(a) positive	9
(b) positive from previous B.C.G. vaccination	20
(c) negative	747
(d) absent from reading	43
Total Number of children tested	819
Number of children referred to the Chest Clinic	9
Number of contacts found to have active disease	NIL

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